

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2002 8:00 am**  
**Secretary of State**  
 05-22-2002 90125 028 \*\*\*150.00

**DOCUMENT # 814185**

1. Entity Name

**SECURITY LIFE OF DENVER INSURANCE COMPANY**

Principal Place of Business

**1290 BROADWAY  
 DENVER CO 80203-5601**

Mailing Address

**1290 BROADWAY  
 DENVER CO 80203-5601**

2. Principal Place of Business

3. Mailing Address

**20 Washington Avenue S.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Route 1261**

City & State

City & State

**Minneapolis, MN**

Zip

Country

Zip

Country

**55401**

**USA**

4. FEI Number

**84-0499703**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND RD.  
 PLANTATION FL**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **S** ☒ Delete  
 NAME **WAGGONER, GARY W**  
 STREET ADDRESS **1290 BROADWAY**  
 CITY-ST-ZIP **DENVER CO 80203**

TITLE **S** ☐ Change ☒ Addition  
 NAME **Paula Cludray-Engelke**  
 STREET ADDRESS **20 Washington Avenue South**  
 CITY-ST-ZIP **Minneapolis, MN 55401**

TITLE **PD** ☒ Delete  
 NAME **CHRISTOPHER, STEPHEN M**  
 STREET ADDRESS **1290 BROADWAY**  
 CITY-ST-ZIP **DENVER CO 80203**

TITLE **D** ☐ Change ☒ Addition  
 NAME **Mark A. Tullis**  
 STREET ADDRESS **5780 Powers Ferry Road NW**  
 CITY-ST-ZIP **Atlanta, GA 30327**

TITLE **V** ☒ Delete  
 NAME **COPELAND, EUGENE L.**  
 STREET ADDRESS **1290 BROADWAY**  
 CITY-ST-ZIP **DENVER CO**

TITLE **D/CFO** ☐ Change ☒ Addition  
 NAME **Wayne R. Huneke**  
 STREET ADDRESS **5780 Powers Ferry Road NW**  
 CITY-ST-ZIP **Atlanta, GA 30327**

TITLE **VD** ☒ Delete  
 NAME **CONROY, T.F.**  
 STREET ADDRESS **1290 BROADWAY**  
 CITY-ST-ZIP **DENVER CO**

TITLE **D** ☐ Change ☒ Addition  
 NAME **P. Randall Lowery**  
 STREET ADDRESS **5780 Powers Ferry Road NW**  
 CITY-ST-ZIP **Atlanta, GA 30327**

TITLE **T** ☐ Delete  
 NAME **PENDERGRASS, DAVID S**  
 STREET ADDRESS **5784 POWERS FERRY RD NW**  
 CITY-ST-ZIP **ATLANTA GA 30327**

TITLE **V/T** ☒ Change ☐ Addition  
 NAME **David S. Pendergrass**  
 STREET ADDRESS   
 CITY-ST-ZIP

TITLE **V** ☒ Delete  
 NAME **SMITH, MARK A.**  
 STREET ADDRESS **1290 BROADWAY**  
 CITY-ST-ZIP **DENVER CO**

TITLE **P** ☐ Change ☒ Addition  
 NAME **Chris D. Schreier**  
 STREET ADDRESS **5780 Powers Ferry Road NW**  
 CITY-ST-ZIP **Atlanta, GA 30327**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Paula Cludray-Engelke*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Paula Cludray-Engelke 4/25/02 612-372-5602**

Date

Daytime Phone #

0513691  
 AT

CR2E034 (9/01)