2004 FOR PROFIT CORPORATION ANNUAL REPORT

03-31-2004 90012 012 ***150 00 **DOCUMENT # 818938** 1. Entity Name CONSECO LIFE INSURANCE COMPANY 44022638 Mailing Address Principal Place of Business 11815 N. PENNSYLVANIA ST. 11815 N. PENNSYLVANIA ST. CARMEL, IN 46032 CARMEL, IN 46032 2. Principal Place of Business 3. Mailing Address 11815 N. PENNSYLVANIA ST. 11815 N. PENNSYLVANIA ST. Suite, Apt. #, etc. Suite, Apt. #, etc. 03182004 CR2E034 (10/03) Cha-P Applied For City & State City & State 4. FEI Number CARMEL, IN CARMEL, IN 04-2299444 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired 46032 46032 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CHIEF FINANCIAL OFFICER Street Address (P.O. Box Number is Not Acceptable) P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 City 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. I am familiar with, and accept the obtigations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. **EVPS** TITLE 🙇 Delete TITLE P/D Addition HERZOG, DAVID K WILLIAM J. SHEA NAME NAME 11815 N. PENNSYLVANIA ST. STREET ADDRESS 11815 N. PENNSYLVANIA ST. STREET ADDRESS CITY-ST-ZIP CARMEL, IN 46032 CITY-ST-7IP CARMEL, IN 46032 Delete CFO/D **T** Change **X** Addition TITLE THEF GEORGAKOPOULOO, ELIZABETH C. NAME NAME EUGENE M. BULLIS STREET ADDRESS 11815 N. PENNSYLVANIA ST. STREET ADDRESS 11815 N. PENNSYLVANIA ST. CITY-ST-7IP CARMEL, IN 46032 CITY-ST-7IP CARMEL, IN 46032 Addition TITLE TITLE Change **Delete** NAME DEVANNEY, WILLIAM TUR. NAME KARL W. KINDIG 11815 N. PENNSYLVANIA ST. STREET ADDRESS 11815 N. PENNSYLVANIA ST. STREET ADDRESS CITY-ST-ZIP CARMEL, IN 46032 CITY-ST-ZIP CARMEL, IN 46032 Change X Addition 🙇 Delete TITLE TITLE HERZOO, DAVID K-NAME NAME DANIEL J. MURPHY STREET ADDRESS 11815 N. PENNSYLVANIA ST. STREET ADDRESS 11815 N. PENNSYLVANIA ST. CITY-ST-ZIP CARMEL, IN 46032 CITY-ST-7IP CARMEL, IN 46032 Addition TITLE 🗖 Delete TITLE **X** Change NAME DYKHOUSE, RICHARD R NAME RONALD F. RUHL 11815 N. PENNSYLVANIA ST. STREET ADDRESS STREET ADDRESS 11815 N. PENNSYLVANIA ST. CITY-ST-ZIP CARMEL, IN 46032 CITY-ST-ZIP CARMEL, IN 46032 Delete TITLE ■ Addition Change Change MURPHY, DANIEL J NAME NAME K. LOWELL SHORT, JR. STREET ADDRESS 11815 N. PENNSYLVANIA ST. STREET ADDRESS 11815 N. PENNSYLVANIA ST. CITY-ST-ZIP CARMEL, IN 46032 CITY-ST-7IP CARMEL, IN 46032

12. 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 10 or Block 11 if

KARL W. KINDIG, SECRETARY

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Mar 31, 2004 8:00 am

Secretary of State