

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 28, 2002 8:00 am**  
**Secretary of State**  
 02-28-2002 90018 027 \*\*\*150.00

**DOCUMENT # 818952**

1. Entity Name  
**USG ANNUITY & LIFE COMPANY**

Principal Place of Business

**909 LOCUST ST  
 P O BOX 617  
 DE MOINES IA 50309  
 US**

Mailing Address

**5780 POWERS FERRY RD NW  
 ATTN: TAX DEPT. P-3  
 ATLANTA GA 30327  
 US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

**20 Washington Ave S  
 Rt 1260  
 Minneapolis, MN  
 55401 USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number

**73-0663836**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND RD.  
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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**

*Please see attached for full list*

11. BLOCK 11: OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>CHERNAU, BARNETT</b>	
STREET ADDRESS	<b>909 LOCUST STREET</b>	
CITY-ST-ZIP	<b>DES MOINES IA 50309</b>	
TITLE	<b>S</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>MUNFORD, JAMES R</b>	
STREET ADDRESS	<b>909 LOCUST ST</b>	
CITY-ST-ZIP	<b>DES MOINES IA</b>	
TITLE	<b>V</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>MAY, THOMAS LOUIS</b>	
STREET ADDRESS	<b>909 LOCUST ST</b>	
CITY-ST-ZIP	<b>DES MOINES IA</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>WELP, CHRISTOPHER R</b>	
STREET ADDRESS	<b>909 LOCUST ST</b>	
CITY-ST-ZIP	<b>DES MOINES IA</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>MCCOY, MICHAEL R</b>	
STREET ADDRESS	<b>909 LOCUST ST</b>	
CITY-ST-ZIP	<b>DES MOINES IA</b>	
TITLE	<b>CAO</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>HARDING, CHERYL L</b>	
STREET ADDRESS	<b>909 LOCUST STREET</b>	
CITY-ST-ZIP	<b>DES MOINES IA 50309</b>	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Chris D. Schreier</b>	
STREET ADDRESS	<b>5780 Powers Ferry Rd NW</b>	
CITY-ST-ZIP	<b>Atlanta, GA 30327</b>	
TITLE	<b>S</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Paula Cludray-Engelke</b>	
STREET ADDRESS	<b>20 Washington Ave S</b>	
CITY-ST-ZIP	<b>Minneapolis, MN 55401</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Wayne R. Huneke</b>	
STREET ADDRESS	<b>5780 Powers Ferry Rd NW</b>	
CITY-ST-ZIP	<b>Atlanta, GA 30327</b>	
TITLE	<b>Executive Vice President &amp; COO</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<b>Assistant Secretary</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Loralee A. Renelt</b>	
STREET ADDRESS	<b>20 Washington Ave S</b>	
CITY-ST-ZIP	<b>Minneapolis, MN 55401</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>P. Randall Lowery</b>	
STREET ADDRESS	<b>5780 Powers Ferry Rd NW</b>	
CITY-ST-ZIP	<b>Atlanta, GA 30327</b>	

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: *Loralee A. Renelt*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/29/02*  
 Date

*612-342-3514*  
 Daytime Phone #

CR2E034 (9/01)

Attachment

# 818952 / 6004174

USG Annuity & Life Company  
909 Locust Street  
Des Moines, IA 50309

Director

Wayne R. Huneke  
P. Randall Lowery  
Thomas J. McInerney  
Robert C. Salipante  
Mark A. Tullis

Title

Director  
Director  
Director  
Director  
Director

Officer

Robert C. Salipante  
Jerome J. Cwiok  
Chris D. Schreier  
Barnett Chernow  
Stephen J. Preston  
Christopher R. Welp  
Boyd G. Combs  
Robert W. Crispin  
Wayne R. Huneke  
William D. Chatham  
James L. Livingston, Jr.  
William L. Lowe  
Ronald J. Markway  
David S. Pendergrass  
Devin L. Reimer  
Richard J. Slavens  
Gary J. Walljasper  
Patricia M. Corbett  
Rhonda R. Elming  
Karen L. Henderson  
Todd E. Nevenhoven  
Paula Cludray-Engelke  
Albert J. Zlogar  
Kimberly M. Curley  
William J. Wagner  
Kent A. Christensen  
William Hope  
Terri W. Maxwell  
Allissa A. Obler  
Loralee A. Renelt  
Rebecca A. Schöff  
John F. Todd  
James R. Mumford  
Frederick C. Litow  
Renee McKenzie  
Glenn A. Black  
Joseph J. Elmy  
G. Michael Fell  
James Taylor  
William Zolkowski

Title

Chief Executive Officer  
President, Investment Products Group Des Moines Insurance Operations  
President  
President and CEO, Investment Products Group  
Executive Vice President and Chief Actuary  
Executive Vice President and Chief Operating Officer  
Senior Vice President, Tax  
Senior Vice President  
Chief Financial Officer  
Vice President, Career Distribution  
Vice President, Finance and Actuarial  
Vice President, Sales and Marketing  
Vice President, New Business and Support Services  
Vice President and Treasurer  
Vice President, Integrated Financial Services  
Vice President and Assistant Secretary  
Vice President, Organization Development and Human Resources  
Assistant Vice President and Assistant Treasurer  
Assistant Vice President, Product Development  
Assistant Vice President, Service Operations  
Assistant Vice President, Tax  
Secretary  
Appointed Actuary  
Actuarial Officer  
Actuarial Officer  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary and Assistant Treasurer  
Assistant Treasurer  
Assistant Treasurer  
Tax Officer  
Tax Officer  
Tax Officer  
Tax Officer  
Tax Officer