

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90119 005 ***150.00

DOCUMENT # 821781

1. Entity Name

UNITED PRESIDENTIAL LIFE INSURANCE COMPANY

Principal Place of Business

**ONE PRESIDENTIAL PARKWAY
P.O. BOX 9006
KOKOMO IN 46904-9006
US**

Mailing Address

**11815 N. PENNSYLVANIA STREET
DEPT. A2A
CARMEL IN 46032**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

35-1109881

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER
CAPITOL BUILDING
TALLAHASSEE FL 32399**

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**

11. OFFICERS AND DIRECTORS

TITLE NAME SVAS
KINDIG, KARL ☐ Delete
STREET ADDRESS 11815 N. PENNSYLVANIA STREET
CITY-ST-ZIP CARMEL IN 46032

TITLE NAME SV
TAYLOR, DENNIS A ☐ Delete
STREET ADDRESS 11815 N. PENNSYLVANIA STREET
CITY-ST-ZIP CARMEL IN 46032

TITLE NAME PD
KILIAN, THOMAS J ☐ Delete
STREET ADDRESS 11815 N. PENNSYLVANIA STREET
CITY-ST-ZIP CARMEL IN 46032

TITLE NAME EVSD
HERZOG, DAVID K ☐ Delete
STREET ADDRESS 11815 N. PENNSYLVANIA STREET
CITY-ST-ZIP CARMEL IN 46032

TITLE NAME SV
DEVANNEY, WILLIAM T JR. ☐ Delete
STREET ADDRESS 11815 N. PENNSYLVANIA STREET
CITY-ST-ZIP CARMEL IN 46032

TITLE NAME SVPT
ADAMS, JAMES S ☐ Delete
STREET ADDRESS 11815 N. PENNSYLVANIA STREET
CITY-ST-ZIP CARMEL IN 46032

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

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TITLE NAME ☐ Change ☐ Addition

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:

SKAWUKE REQUIRED

KARL W. KINDIG

317-817-6000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)