



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 05, 2004 8:00 am**  
**Secretary of State**

04-05-2004 90057 003 \*\*\*150.00

<b>DOCUMENT # 824954</b> 1. Entity Name <b>CONCORD HERITAGE LIFE INSURANCE COMPANY, INC.</b>					
Principal Place of Business <b>ONE PILLSBURY SQ CONCORD NEW HAMPSHIRE, CO 03302-2020 US</b>				Mailing Address <b>1776 AHL SE JACKSONVILLE, FL 32224-6688 US</b>	
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip      Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country			
03122004      Chg-P      CR2E034 (10/03)				4. FEI Number <b>02-0268648</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST. TALLAHASSEE, FL 32399-0000</b>				7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)      DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GUIDOS, GREGORY J 1776 AMERICAN HERITAGE LIFE DR JACKSONVILLE, FL 32224	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PHIPPS, VIRGINIA ONE PILLSBURY STREET CONCORD, NH 03302	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Baggs, Charles C. 1776 American Heritage Life Dr. Jacksonville, FL 32224	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS LEIBY, JOHN S ONE PILLSBURY STREET CONCORD, NH 03301	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC BIRD, DAVID A 1776 AMERICAN HERITAGE LIFE DR JACKSONVILLE, FL 32224	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> _____ <b>GREGORY J. GUIDOS</b> 3/17/04 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #</small>					

*Attachment*

*#824954*

As of 3/8/2004

## Directors / Officers Report

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### Concord Heritage Life Insurance Company, Inc.

#### Directors

Charles Calvin Baggs  
David Andrew Bird  
Gregory James Guidos  
William Harrison Monie, Jr.  
Gary Scott Stere

Director  
Director  
Director  
Director  
Director

#### Officers

David Andrew Bird  
Charles Calvin Baggs  
Samuel Henry Pilch  
Karen Cassidy Gardner  
John S. Leiby  
Gary Scott Stere  
Gregory James Guidos  
Emma Marguerite Kalaidjian  
Kristine Ellen Leston  
Michael Joseph Velotta  
Barry Saliowitz Paul  
James Philip Zils

Chairman of the Board of Directors  
President  
Group Vice President  
Vice President - Tax  
Vice President  
Secretary  
Treasurer  
Assistant Secretary  
Assistant Secretary  
Assistant Secretary  
Assistant Treasurer  
Assistant Treasurer

#### Other

Nestor Almaria  
Lynn Cirincione  
Dave Simek

Authorized Representative  
Authorized Representative  
Authorized Representative