

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 830778 (7)

1. Corporation Name

LINCOLN FINANCIAL GROUP, INC.



Principal Place of Business

% TAX DEPARTMENT  
1300 S. CLINTON STREET  
FT. WAYNE IN 46802-3506

Mailing Address

% LNL CONTROLLERS  
1300 S. CLINTON ST. P.O. BOX 7839  
FT WAYNE IN 46801  
US

3. Date Incorporated or Qualified

09/07/1973

3a. Date of Last Report

04/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

% LNL CONTROLLERS

4. FEI Number

35-1299729

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE 1V ☒ DELETE  
NAME ROESLER, MAX A  
STREET ADDRESS 1300 S CLINTON ST  
CITY-ST-ZIP FT WAYNE, IND 0

1.1 TITLE TREASURER ☐ Change ☒ Addition  
1.2 NAME JANET C WHITNEY  
1.3 STREET ADDRESS 1300 S. CLINTON ST  
1.4 CITY-ST-ZIP FORT WAYNE, INDIANA 46801

TITLE S ☐ DELETE  
NAME WOMACK, C. SUZANNE  
STREET ADDRESS 1300 S CLINTON ST  
CITY-ST-ZIP FT WAYNE, IND 0

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE V ☐ DELETE  
NAME BEHRENDT, JOHN M  
STREET ADDRESS 1300 S CLINTON ST.  
CITY-ST-ZIP FT. WAYNE IN

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE AS ☐ DELETE  
NAME HOELLE, LOIS M.  
STREET ADDRESS 1300 S CLINTON ST  
CITY-ST-ZIP FT WAYNE, IN 00000

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE PD ☒ DELETE  
NAME MCPHAIL, GARY  
STREET ADDRESS 1300 S CLINTON ST  
CITY-ST-ZIP FT WAYNE, IND 0

5.1 TITLE PRESIDENT ☐ Change ☒ Addition  
5.2 NAME JOHN A. BOSCIA  
5.3 STREET ADDRESS 1300 S. CLINTON STREET  
5.4 CITY-ST-ZIP FORT WAYNE, IN 46801

TITLE AS ☐ DELETE  
NAME BEEKS, RENE L  
STREET ADDRESS 1300 S CLINTON ST  
CITY-ST-ZIP FT WAYNE IN

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John M. Behrendt JOHN M BEHRENDT

4/22/96 (219) 455-2607

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)