2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#832114

Entity Name: LINCOLN HERITAGE LIFE INSURANCE COMPANY

Feb 27, 2004 Secretary of State

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

4343 E CAMELBACK RD 4343 E CAMELBACK RD SUITE 400

P.O. BOX 29045 PHOENIX, AZ 85018 PHOENIX, AZ 85018

Current Mailing Address: New Mailing Address:

4343 E CAMELBACK RD 4343 E CAMELBACK RD P.O. BOX 29045 SUITE 400

PHOENIX, AZ 85018 US PHOENIX, AZ 85018

FEI Number: 04-2314290 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLORIDA INS. COMMISIONER THE CAPITOL TALLAHASSEE, FL 32399

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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition LONDEN, THOMAS. LONDEN, THOMAS Name: Name: 4343 E. CAMELBACK RD. 4343 E. CAMELBACK RD. Address: Address:

PHOENIX, AZ 85018 City-St-Zip: PHOENIX AZ City-St-Zip:

CD Title: CD Title: () Delete (X) Change () Addition Name: LONDEN, JACK, Name: LONDEN, JACK

4343 E. CAMELBACK RD. 4343 E. CAMELBACK RD. Address: Address: PHOENIX, AZ 85018 City-St-Zip: PHOENIX, AZ City-St-Zip:

Title: (X) Change () Addition DTS () Delete Title: DTS

LATHROP, DEAN, LATHROP, DEA A Name: Name: 4343 E, CAMELBACK RD. 4343 E. CAMELBACK RD. Address: Address: City-St-Zip: PHOENIX, AZ City-St-Zip: PHOENIX, AZ 85018

Title: () Delete Title: (X) Change () Addition

SCHUNEMAN, LARRY SCHUNEMAN, LARRY, Name: Name: Address: 4343 E. CAMELBACK RD. Address: 4343 E. CAMELBACK RD. City-St-Zip: PHOENIX, AZ City-St-Zip: PHOENIX, AZ 85018

Title: Title: (X) Change () Addition () Delete

LONDEN, DORIS M LONDEN, DORIS M Name: Name: 4343 E. CAMELBACK RD. Address: 4343 E. CAMELBACK RD. Address: City-St-Zip: PHOENIX, AZ City-St-Zip: PHOENIX, AZ 85018

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY SCHUNEMAN ٧ 02/27/2004