

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
 04-24-2001 90284 044 ***150.00

DOCUMENT # 839028

1. Entity Name

NORTHERN LIFE INSURANCE COMPANY

Principal Place of Business

**1501 FOURTH AVE
 STE 1000
 SEATTLE WA 98101**

Mailing Address

**1501 FOURTH AVE
 STE 1000
 SEATTLE WA 98101**

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 **41-1295933**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STATE INSURANCE COMMISSIONER
 CAPITOL BUILDING
 TALLAHASSEE FL 32304**

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KAUFMAN, DOUGLAS R 3964 262ND AVE. SE ISSAQUAH WA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MILLER, JAMES R 2043 NE 64TH PL REDMOND WA	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BERGEN, SUSAN M 436 PORTLAND AVE #13 ST PAUL MN	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DUBES, MICHAEL J. 3529 264TH AVE., SE ISSAQUAH WA	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS RENELT, LORALES A 20 WASHINGTON AVE S MINNEAPOLIS MN 55401	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	See Attached	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
V/T David S. Pendergrass 5780 Powers Ferry Road Atlanta, GA 30327-4390	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
S Paula Cludray-Engelke 20 Washington Ave. S. Minneapolis, MN 55401	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
P/CEO Thomas J. McInerney 151 Farmington Hartford, CT 06156	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> 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:

Rebecca A. Schuff **Rebecca A. Schuff** **4-17-01** **612/342-3920**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (10/00)

Northern Life Insurance Company
1501 Fourth Avenue, Suite 1000
Seattle, WA 98101

Attachment
824007
839028

<u>Director</u>	<u>Title</u>
Wayne Robert Huneke	Director
P. Randall Lowery	Director
Thomas Joseph McInerney	Director
Robert Charles Salipante	Director
Mark Alan Tullis	Director

<u>Officer</u>	<u>Title</u>
Thomas Joseph McInerney	President and Chief Executive Officer
Jerome Augustus Mills	Executive Vice President
Richard Ralph Crowl	Senior Vice President, General Counsel and Assistant Secretary
Wayne Robert Huneke	Chief Financial Officer
Arthur William Hultgren	Vice President
John Anthony Johnson	Vice President
Douglas Reid Kaufman	Vice President
Chris Duane Schreier	Vice President and Assistant Treasurer
Thomas J. Balachowski	Vice President and CEO, Investment Management
Mark Steven Jordahl	Vice President and Chief Investment Officer
Elisabeth Regula Bennett	Vice President and Medical Director
David Scott Pendergrass	Vice President and Treasurer
Jeffrey William Seel	Vice President, Investments
Fred Cooper Smith	Vice President, Investments
Richard Contreras	Vice President, Marketing
Michael Vincent Eckman	Second Vice President and Appointed Actuary
Paula Cludray-Engelke	Secretary
Rose E. Berg	Assistant Secretary
Michael Stanford Fischer	Assistant Secretary
Deborah A. Ljungkull	Assistant Secretary
Rhonda L. Massine	Assistant Secretary
Carol J. Moller	Assistant Secretary
Allissa A Obler	Assistant Secretary
Delaine M. Omonaka	Assistant Secretary
Wendy L. Paquin	Assistant Secretary
Loralee Ann Renelt	Assistant Secretary
Steven P. Ruppel	Assistant Secretary
Rebecca A. Schoff	Assistant Secretary
Gerald Martin Sherman	Assistant Secretary
Patricia M. Smith	Assistant Secretary
Patricia A. Thompson	Assistant Secretary
Terri Wecker Maxwell	Assistant Secretary
Renee McKenzie	Assistant Secretary and Assistant Treasurer
Gregory Melvin Anderson	Assistant Treasurer
Frederick C. Litow	Assistant Treasurer
Glenn Allan Black	Tax Officer
Joseph J. Elmy	Tax Officer
Michael Fell	Tax Officer
John Gosney Turner	Chairman