2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 15, 2000 8:00 am Secretary of State **DOCUMENT #844269** 1. Entity Name THE PAUL REVERE PROTECTIVE LIFE INSURANCE COMPAN 03-15-2000 90074 027 ***150.00 Principal Place of Business Mailing Address 18 CHESTNUT STREET 1 FOUNTAIN SQUARE CHATTANOOGA TN 37402-1307 WORCESTER MA 01608 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 04-2528304 Not Applicable Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE INSURANCE COMMISIONER OF FLORIDA! Street Address (P.O. Box Number is Not Acceptable) CAPITOL BUILDING TALLAHASSEE FL 32304 City Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. TITLE X Delete TITI F Change Addition OLINGY, JEFFREY F NAME NAME 1 FOUNTAIN SQUARE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CHATTANOOGA TN 37402** ☐ Addition ☐ Defete TITLE Change TITLE. COPELAND, DEAN F NAME NAME D/V 1 FOUNTAIN SQUARE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CHATTANNGA TN 37402** ☐ Change ☐ Addition TITLE ☐ Delete TITLE GREVING, ROBERT C NAME NAME 1 FOUNTAIN SQUARE STREET ADDRESS STREET ADDRESS CITY-ST-7IF CHATTANOOGA TN 37402 CITY-ST-ZIP Change Addition **▼**Delete TITLE BEST, ROBERT O NAME STREET ADDRESS 1 FOUNTAIN SQUARE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP CHATTANOOGA TN 37402 Change Addition TITLE **▼** Delete TITLE MADEJA, PETER C NAME NAME 23 CABOT COURT STREET ADDRESS STREET ADDRESS

13. Thereby 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

X Delete

SIGNATURE:

WAYNE PA 19087

HEYS, THOMAS B

FOUNTAIN SQUARE

CHATTANNOGA TN 37402

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED NAME OF

0.4.200

☐ Change

Addition

PAUL REVERE PROTECTIVE LIFE INSURANCE COMPANY

FEIN: 04-2528304

ATTACHMENT TO FLORIDA CORPORATION ANNUAL REPORT

Box 12 OFFICERS AND DIRECTORS (CONTINUED)

7.1	D
7.2	Sorensen, Burton E.
7.3	4681 Rue Belle, Mer
7.4	Sanibel, FL 33957
8.1	V
8.2	Corbett Vicki W.
8.3	1 Fountain Square
8.4	Chattanooga, TN 37402
9.1	D/PC
9.2	Chandler, J. Harold
9.3	1 Fountain Square
9.4	Chattanooga, TN 37402
10.1	D
10.2	Watjen, Thomas R.
10.3	1 Fountain Square
10.4	Chattanooga, TN 37402
11.1 11.2 11.3	VS Roth, Susan N. 1 Fountain Square Chattanooga, TN 37402

PAUL REVERE PROTECTIVE LIFE INSURANCE COMPANY

FEIN: 04-2528304

ATTACHMENT TO FLORIDA CORPORATION ANNUAL REPORT

ADDITIONS

12.1	V/D
12.2	Rosen, Elaine D.
12.3	2211 Congress Street
12.4	Portland, ME 04122
13.1	V
13.2	Lang, John M.
13.3	2211 Congress Street
13.4	Portland, ME 04122
14.1	D .
14.2	Moody Jr., James L.
14.3	16 Running Tide Road
144	Cape Elizabeth, ME 04107