2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Mar 03, 2000 8:00 am DOCUMENT # 850744 1. Entity Name **Secretary of State** EMPIRE GENERAL LIFE ASSURANCE CORPORATION 03-03-2000 90035 040 ***150.00 Principal Place of Business Mailing Address 2801 HWY 280 SOUTH P O BOX 2606 BIRMINGHAM AL 35223 BIRMINGHAM AL 35202-2606 916811 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 63-1073929 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) CAPITOL BLDG. TALLAHASSEE FL 32301 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE DRAYTON NABERS, JR. NAME NAME STREET ADDRESS 2801 HWY 280 SOUTH STREET ADDRESS CITY-ST-ZIP BIRMINGHAM AL CITY-ST-ZIP DRESIDENT TITLÉ Delete TITLE Douglas K. Adam 2400 W. 130th St., Suite 400 R. STEPHEN BRIGGS NAME NAME 2801 HWY 280 SOUTH STREET ADDRESS STREET ADDRESS **BIRMINGHAM AL** CITY-ST-ZIP Overland Park KS 66213 CITY-ST-ZIP Addition TITLE TITLE Delete A. S. WILLIAMS III NAME NAME 2801 HWY 280 SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BIRMINGHAM AL** ☐ Change Addition SD TITLE ☐ Delete TITLE LONG, DEBORAH J NAME NAME 2801 HWY 280 SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BIRMINGHAM AL 11 SVCA Change TITLE ☐ Delete TITLE ☐ Addition STUENKEL, WAYNE E. NAME 2801 HIGHWAY 280 SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BIRMINGHAM AL 35223 EVCF** ☐ Delete □ Change Addition TITLE TITLE JOHNS, JOHN D. NAME STREET ADDRESS 2801 HIGHWAY 280 SOUTH STREET ADDRESS CITY-ST-7IP **BIRMINGHAM AL 35223** CITY-ST-ZIP 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