FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 20 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **853350** **(7)**

1. Corporation Name

LUTHERAN BROTHERHOOD VARIABLE INSURANCE PRODUCTS COMPANY

Principal Place of Business	Mailing Address
625 FOURTH AVENUE, SOUTH MINNEAPOLIS MN 55415	625 FOURTH AVENUE, SOUTH MINNEAPOLIS MN 55415

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **07/02/1982**

3a. Date of Last Report: **03/23/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

City & State — 23

City & State — 28

Zip — 24 County — 25

Zip — 29 Country — 30

4. FEI Number: **41-1437943** ☐ 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. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER OF THE STATE OF FL
STATE CAPITOL
TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1 1 TITLE	☐ Change ☐ Addition
NAME	BJELLAND, ROLF F.	1 2 NAME	
STREET ADDRESS	625 4TH AVE S	1 3 STREET ADDRESS	
CITY - ST - ZIP	MINNEAPOLIS MN	1 4 CITY - ST - ZIP	
TITLE	V	2 1 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, RICHARD J.	2 2 NAME	
STREET ADDRESS	625 4TH AVE S.	2 3 STREET ADDRESS	
CITY - ST - ZIP	MINNEAPOLIS MN	2 4 CITY - ST - ZIP	
TITLE	VS	3 1 TITLE	☐ Change ☐ Addition
NAME	LARSON, DAVID J	3 2 NAME	
STREET ADDRESS	625 4TH AVE S	3 3 STREET ADDRESS	
CITY - ST - ZIP	MINNEAPOLIS MN	3 4 CITY - ST - ZIP	
TITLE	D	4 1 TITLE	☐ Change ☐ Addition
NAME	NICHOLSON, BRUCE J.	4 2 NAME	
STREET ADDRESS	625 4TH AVE S.	4 3 STREET ADDRESS	
CITY - ST - ZIP	MINNEAPOLIS MN	4 4 CITY - ST - ZIP	
TITLE	DPC	5 1 TITLE	☐ Change ☐ Addition
NAME	GANDRUD, ROBERT P	5 2 NAME	
STREET ADDRESS	625 4TH AVE S	5 3 STREET ADDRESS	
CITY - ST - ZIP	MINNEAPOLIS MN	5 4 CITY - ST - ZIP	
TITLE	V	6 1 TITLE	☐ Change ☐ Addition
NAME	HILBERT, OTIS F.	6 2 NAME	
STREET ADDRESS	625 4TH AVE S.	6 3 STREET ADDRESS	
CITY - ST - ZIP	MINNEAPOLIS MN	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)(i), 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: David J. Larson (M) David J. Larson 4-20-95 (612) 340-7214

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0487830 FP

95 3350

Lutheran Brotherhood Variable Insurance Products Company
Corporation Annual Report - 1995 ***(continued)***

Block 12. Officers and Directors:

Name	Title	Address, City, State, Zip
Paul R. Ramseth	D	625 4th Ave. So., Minneapolis, MN
William H. Reichwald	V/D	625 4th Ave. So., Minneapolis, MN
David J. Christianson	V	625 4th Ave. So., Minneapolis, MN
James R. Olson	V	625 4th Ave. So., Minneapolis, MN
Bruce M. Piltingsrud	V	625 4th Ave. So., Minneapolis, MN
Jerald E. Sourdiff	V	625 4th Ave. So., Minneapolis, MN
James M. Walline	V	625 4th Ave. So., Minneapolis, MN
Anita J.T. Young	T	625 4th Ave. So., Minneapolis, MN