

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90003 039 ***550.00

DOCUMENT # 857832

1. Entity Name
ACCELERATION LIFE INSURANCE COMPANY



Principal Place of Business
**7 WEST 7TH STREET
1670
CINCINNATI, OH 45202**

Mailing Address
**520 MARYVILLE CENTRE DRIVE
500
SAINT LOUIS, MO 63141**

54063062



2. Principal Place of Business
1800 North Point Drive

3. Mailing Address
1800 North Point Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07132004

Chg-P

CR2E034 (10/03)

City & State
Stevens Point, WI

City & State
Stevens Point, WI

4. FEI Number
31-0835312

Applied For
☐ Not Applicable

Zip
54481

Country
U.S.A.

Zip
54481

Country
U.S.A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRIGGS, BRENT E 520 MARYVILLE CENTRE SAINT LOUIS, MO 63141 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HACKETT, RICHARD C 520 MARYVILLE CENTRE DR, SUITE 500 SAINT LOUIS, MO 63141 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS MCMULLEN, WILLIAM L JR 2801 HWY 280 SOUTH BIRMINGHAM, AL 32502 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KUPFERMAN, E. PERRY 520 MARYVILLE CENTRE SAINT LOUIS, MO 63141 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT CARIOLANO, GREGG O 520 MARYVILLE CENTRE DR, SUITE 500 SAINT LOUIS, MO 63141 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DEWNAR, MARK S 520 MARYVILLE CENTRE SAINT LOUIS, MO 63141 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C.ofB., D Dale R. Schuh 1800 North Point Drive Stevens Point WI 54481 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Kevin P. Castles 1800 North Point Drive Stevens Point WI 54481 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Richard T. LaBelle 1800 North Point Drive Stevens Point WI 54481 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S D William M. O'Reilly 1800 North Point Drive Stevens Point WI 54481 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T D William J. Lohr 1800 North Point Drive Stevens Point WI 54481 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Janet L. Fagan 1800 North Point Drive Stevens Point WI 54481 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kevin P. Castles, President 7/13/04

715-346-6900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

54063062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:

#85782

Title: D
Name: James J. Weishan
Street Address: 1800 North Point Drive
City-ST-Zip: Stevens Point, WI 54481

☐ Change ☒ Addition