2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State
03-20-2000 90062 002 ***150.00

DOCUMENT # 857933

1. Entity Name

LINCOLN BENEFIT LIFE COMPANY

Principal Place of Business	Mailing Address
P.O. BOX 80469 LINCOLN NE 68501-0469	3075 SANDERS RD STE H2C NORTHBROOK IL 60062-7119

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite ~~#~~ H1A
City & State	City & State
Zip / Country	Zip 60062-7127 / Country

4. FEI Number 47-0221457 ☐ 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
INSURANCE COMMISSIONER THE CAPITOL TALLAHASSEE FL	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, 2000 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	VSD MORRIS, JOHN J 2021 THE KNOLLS LINCOLN NE	☒ Delete	V,D Ashley, Thomas R. 206 South 13th Street Suite 300 Lincoln, NE 68508	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ANDERBERY, JANET P 5120 JADE COURT LINCOLN NE 68516	☐ Delete	V 206 South 13th Street Suite 300 Lincoln, NE 68508	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GAER, DOUGLAS F 2480 LAKE ST LINCOLN NE 68502	☐ Delete	VD 206 South 13th Street Suite 300 Lincoln, NE 68508	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WRAITH, B. EUGENE 10605 ADAMS DRIVE OMAHA NE	☐ Delete	206 South 13th Street Suite 300 Lincoln, NE 68508	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD WAY, DEAN M 206 S. 13TH ST. LINCOLN NE 68508	☒ Delete	V,SD Watson, Carol S. 206 South 13th Street Suite 300 Lincoln, NE 68508	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVPD RICH, ROBERT E 6801 DEERWOOD DRIVE LINCOLN NE	☐ Delete	VD 206 South 13th St. Suite 300 Lincoln, NE 68508	☒ Change ☐ 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: Lynn Cirincione Lynn Cirincione Authorized Representative 1/29/00 847-402-3029
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #