2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005864

Entity Name: LINCOLN FINANCIAL GROUP, INC.

FILED Apr 12, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1300 SOUT	H CLINTON ST NE, IN 46802				
Current Ma	ailing Address	:	New Mailii	New Mailing Address:	
1300 SOUTH CLINTON STREET FORT WAYNE, IN 46802					
FEI Number: 36-2777974		FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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.					
SIGNATUR					
Electronic Signature of Registered Agent			t	 Date	
Election Cam		Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ()E	Delete FORD (DRIVE, SUITE 300	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	GASE, LUCY D	Delete NTON STREET, SUITE 150 N 468022706	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	TRUMBLE, CASE	TREET, 34TH FLOOR	Title: Name: Address: City-St-Zip:	SVD (X) Change () Addition TRUMBLE, CASEY J. 2005 MARKET STREET, 34TH FLOOR PHILADELPHIA, PA 19103	
Title: Name: Address: City-St-Zip:	DINEEN, ROBER	TREET, 34TH FLOOR	Title: Name: Address: City-St-Zip:	S (X) Change () Addition ONDECKER, MARILYN K 1300 SOUTH CLINTON STREET FORT WAYNE, IN 46802	
Title: Name: Address: City-St-Zip:	CRAWFORD, FR	TREET, SUITE 3900	Title: Name: Address: City-St-Zip:	T (X) Change () Addition BERNT, DUANE L 1500 MARKET STREET, SUITE 3900 PHILADELPHIA, PA 19102	
Title: Name: Address: City-St-Zip:	MILLS, TRINÀ	Delete NTON STREET SUITE 150 N 468022706	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRINA MILLS AS 04/12/2006