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

FILED
95 JAN 23 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F92000000089 (4)

1. Corporation Name
GLENBROOK LIFE AND ANNUITY COMPANY

Principal Place of Business	Mailing Address
3100 SANDERS ROAD N5A NORTHBROOK IL 60062-7154 US	3100 SANDERS ROAD N5A NORTHBROOK IL 60062-7154 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/03/1992	3a. Date of Last Report: 02/09/1994
4. FEI Number: 35-1113325	☐ 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. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
INSURANCE COMMISSIONER THE CAPITOL TALLAHASSEE FL	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	PCD	1.1 TITLE	☐ Change ☐ Addition
NAME	LOWER, LOUIS G II	1.2 NAME	
STREET ADDRESS	3100 SANDERS ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBROOK IL 60062	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	MCPHERSON, DAVID E	2.2 NAME	DELETE
STREET ADDRESS	3100 SANDERS ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBROOK IL	2.4 CITY-ST-ZIP	
TITLE	VSD	3.1 TITLE	☐ Change ☐ Addition
NAME	VELOTTA, MICHAEL J	3.2 NAME	
STREET ADDRESS	3100 SANDERS ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBROOK IL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	☐ Change ☐ Addition
NAME	HECKMAN, PETER H	4.2 NAME	
STREET ADDRESS	3100 SANDERS ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBROOK IL	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	☐ Change ☐ Addition
NAME	FRIEDMAN, MARLA G	5.2 NAME	
STREET ADDRESS	3100 SANDERS ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBROOK IL	5.4 CITY-ST-ZIP	
TITLE	T	6.1 TITLE	☐ Change ☐ Addition
NAME	RESNICK, MYRON J	6.2 NAME	
STREET ADDRESS	3100 SANDERS ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBROOK IL	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: Peter H. Heckman 1-11-95 708-402-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Peter H. Heckman V.P. Finance

0305234 CP

12.

7.1	TITLE	V
7.2	NAME	Gary W. Fridley
7.3	ADDRESS	3100 Sanders Road
7.4	CITY-ST-ZIP	Northbrook IL 60062-7154

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GLENBROOK LIFE AND ANNUITY COMPANY
3100 Sanders Road
NORTHBROOK, ILLINOIS 60062

January 11, 1995

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee FL 32302-1500

Gentlemen:

Enclosed please find our check number 5971 in the amount of $200 in payment of the 1995 Corporation Annual Report for the Glenbrook Life and Annuity Company. Also enclosed is the completed 1995 Corporation Annual Report.

Very truly yours,
GLENBROOK LIFE AND ANNUITY COMPANY

David Simek

David Simek
Authorized Representative

enclosure