

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F930000000096

1. Entity Name

USLIFE INDEMNITY COMPANY

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90225 002 ***150.00

Principal Place of Business

WOODFIELD LAKE
SCHAUMBURG IL 60173

Mailing Address

ONE WOODFIELD LAKE
SCHAUMBURG IL 60173-5012

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32399-0300

4. FEI Number

93-0928517

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

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.

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
DS	STANTON, SHERRI C	ONE WOODFIELD LAKE	SCHAUMBURG IL	<input checked="" type="checkbox"/>
DP	KEELER, WILLIAM M	ONE WOODFIELD LAKE	SCHAUMBURG IL	<input type="checkbox"/>
DV	THOME, ALFRED N	ONE WOODFIELD LAKE	SCHAUMBURG IL	<input type="checkbox"/>
D	D'AGOSTINO, JAMES S. J	2929 ALLEN PARKWAY	HOUSTON TX 77019	<input checked="" type="checkbox"/>
DV	STANKO, RICHARD E	ONE WOODFIELD LAKE	SCHAUMBURG IL	<input type="checkbox"/>
D	NEWTON, JON P.	2929 ALLEN PARKWAY	HOUSTON TX 77019	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
AS	Susan G. Miller	2929 Allen Parkway	Houston, Texas 77019	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		3600 Route 66	Neptune, NJ 07754-1580	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		3600 Route 66	Neptune, NJ 07754-1580	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D VP	William H. Keffer	1000 Woodfield Road	Schaumburg, IL 60173-4793	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D VP	Reed C. Gass	1000 Woodfield Road	Schaumburg, IL 60173-4793	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard E. Stanko

4/24/00

Date

847-517-6000

Daytime Phone

CR2E034 (9/99)

F930000000916

H0058699

Additions to 12.

Title: D

Name: Votava, Scott A.

Street Address: One Woodfield Lake

City-St-Zip Schaumburg, IL 60173-4793