2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 18, 2001 8:00 am Secretary of State DOCUMENT # F9300000096 1. Entity Name USLIFE INDEMNITY COMPANY 04-18-2001 90024 010 ***150.00 Mailing Address Principal Place of Business ONE WOODFIELD LAKE one woodfield lake SCHAUMBURG IL 60173 SCHAUMBURG IL 60173 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 93-0928517 Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) THE CAPITOL TALLAHASSEE FL 32399-0300 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. X Addition ☐ Change Secretary Delete TITLE TITLE MILLER, SUSAN G Pauletta P. Cohn NAME NAME STREET ADDRESS 2929 ALLEN PKWY 2929 Allen Parkway STREET ADDRESS CITY-ST-ZIP Houston" Texas 77019 **HOUSTON TX 77019** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE KEELER, WILLIAM M NAME NAME STREET ADDRESS STREET ADDRESS 3600 RTE 66 CITY-ST-ZIP CITY-ST-ZIP **NEPTUNE NJ 07754-1580** Change ☐ Addition Delete -- ---TITLE -TITLE THOME, ALFRED N NAME STREET ADDRESS STREET ADDRESS 3600 RTE 66 CITY-ST-ZIP CITY-ST-ZIP **NEPTUNE NJ 07754-1580** ☐ Change ☐ Addition Delete TITLE KEFFER, WILLIAM H NAME NAME STREET ADDRESS STREET ADDRESS 1000 WOODFIELD RD CITY-ST-ZIP CITY-ST-ZIP **SCHAUMBURG IL 60173-4793** ☐ Addition ☐ Change Delete TITLE TITLE STANKO, RICHARD E NAME STREET ADDRESS STREET ADDRESS ONE WOODFIELD LAKE CITY-ST-ZIP CITY-ST-ZIP SCHAUMBURG IL D۷ ☐ Delete TITLE Change Addition TITLE NAME GASS, REED C NAME

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 and address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

1000 WOODFIELD RD

SCHAUMBURG IL 60173-4793

STREET ADDRESS

Richard E. Stanko

4/9/01

(847) 517-6000

Daytime Phone #



531791

Additions to 12.

Title:

D

Name:

Votava, Scott A.

Street Address:

One Woodfield Lake

City-St-Zip

Schaumburg, IL 60173-4793

Title:

President

Name:

Donald W. Britton

Street Address:

2929 Allen Parkway

City-St-Zip

Houston, Texas 77019