2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F93000002207

Entity Name: OLD STANDARD LIFE INSURANCE COMPANY

FILED Apr 12, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8601 EMERALD 8601 EMERALD 150 SUITE 150 BOISE, ID 83704 BOISE, ID 83704 US **Current Mailing Address:** New Mailing Address: 601 W 1ST AVE 601 W 1ST AVE DEPT. 115000 LEGAL DEPT. SPOKANE, WA 992015015 US SPOKANE, WA 992015015 US FEI Number: 82-0421178 FEI Number Applied For () FEI Number Not Applicable () 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 32301 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. SIGNATURE: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition RUDD, CLAYTON RUDD, CLAYTON Name: Name: 8601 EMERALD, STE. 150 8601 EMERALD, STE. 150 Address: Address: City-St-Zip: BOISE ID City-St-Zip: **BOISE. ID 83704 US** VPD Title: VPD Title: () Delete (X) Change () Addition Name: SANDIFUR, PHILIP Name: SANDIFUR, PHILIP 929 W SPRAGUE AVE 601 W 1ST AVE DEPT. 115000 Address: Address: SPOKANE, WA 99201 SPOKANE, WA 992015015 US City-St-Zip: City-St-Zip: Title: VPD Title: STD () Delete (X) Change () Addition TURNER, TOM TURNER, TOM Name: Name: 929 W SPRANGE AVE 601 W 1ST AVE DEPT. 115000 Address: Address: City-St-Zip: SPOKANE, WA 99201 City-St-Zip: SPOKANE, WA 99201 () Delete Title: Title: () Change () Addition POTTER, ROBERT Name: Name: Address: EAST 4424 SPLIT ROCK RD. Address: City-St-Zip: City-St-Zip: HAYDEN LAKE, ID Title: () Delete Title: (X) Change () Addition GINTER, CAROL Name: STEFFENS, ANTHONY Name: 371 PONDERSOSA DRIVE Address: 8601 EMERALD, SUITE 150 Address: City-St-Zip: POST FALLS, ID City-St-Zip: BOISE, ID 83704 Title: ASD () Delete Title: () Change () Addition GIFFORD, MARSHA Name: Name: 929 W SPRANGE AVE Address: Address: City-St-Zip: BOISE, ID 99201 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PHILIP SANDIFUR VPD 04/12/2002

JAMES V. HAWKINS, DIRECTOR 163 E RIDGELINE DR. BOISE, ID 83702-6517

GREG STRATE, VP/S/T/D 601 W 1ST AVE DEPT. 115000 SPOKANE, WA 992015015