2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003838

FILED Jan 14, 2005 Secretary of State

Entity Name: LINCOLN NATIONAL FINANCIAL INSTITUTIONS GROUP, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:			
P.O. BOX		TREET					
FT. WAYN	IE, IN 46802	US					
Current Mailing Address:			New Maili	New Mailing Address:			
		_ DISTRIBUTORS					
350 CHUR HARTFOR	RCH ST. RD, CT 06103	US					
FEI Number:	: 52-0991567	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status D	esired()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Age	ent:	
		ORPORATION SYSTEM, INC.					
1201 HAYS TALLAHAS	S STREET SSEE, FL 3230	1 US					
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing i	its registered	office or registered ag	ent, or both,	
SIGNATUR	RE:						
	Electroni	c Signature of Registered Age	nt		Date		
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title:		Delete	Title:	() Change () Addition		
Name: Address:	CAULFIELD, PA 305 CHURCH S		Name: Address:				
City-St-Zip:	HARTFORD, CT	06103	City-St-Zip:				
Title:		Delete	Title:	() Change () Addition		
Name:	QUINLAN, HOW	ARD `H ST., STE. 100	Name: Address:				
Address: City-St-Zip:	EDEN PRAIRIE,		City-St-Zip:				
Title:	S ()	Delete	Title:	() Change () Addition		
Name:	BYRER, JOYCE		Name:				
Address: City-St-Zip:	1300 S. CLINTO FORT WAYNE, I		Address: City-St-Zip:				
		11 40002	City-St-Zip.				
Title:	` '	Delete	Title:	,	X) Change () Addition		
Name: Address:	CRAWFORD, FI	STREET, SUITE 3900	Name: Address:	CRAWFORD,	FREDERICK FSTREET, SUITE 3900		
City-St-Zip:	PHILADELPHIA,	•	City-St-Zip:		A, PA 191022112		
Title:	()	Delete	Title:	() Change () Addition		
Name:	BEEKS, RENEE		Name:				
Address: City-St-Zip:	13000 SOUTH C	CLINTON STREET	Address: City-St-Zip:				
City-St-Zip.	TORT WATNE,	114 40802	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: PATRICK J. CAULFIELD PD 01/14/2005