

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000003840

1. Entity Name

THE FINANCIAL RESOURCES DEPARTMENT, INC.

FILED

00 APR 27 PM 3:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1300 SOUTH CLINTON STREET
P.O. BOX 1110
FT. WAYNE IN 46802
US

Mailing Address
C/O FIRST PENN-PACIFIC LIFE INSURANCE CO.
1801 SOUTH MEYERS ROAD
OAKBROOK TERRACE IL 60181-5242
US

2. Principal Place of Business

3. Mailing Address Insurance Company
c/o First Penn-Pacific Life
10 North Martingale Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Schaumburg, IL

4. FEI Number 38-3034551

Applied For
Not Applicable

Zip Country
60173 U.S.A.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD FITCH, THOMAS W 1801 WOUTH MEYERS ROAD OAKBROOK TERRACE IL 60181	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WOMACK, C. SUZANNE 1300 SOUTH CLINTON STREET FORT WAYNE IN 46801	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT ROGERS, STEVEN W 1055 E. WILLIAMS DRIVE PALATINE IL 60067	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT WHITNEY, JANET C 10002 CROWN POINT DRIVE FORT WAYNE IN 46804	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT CHRZAN, JANET 1300 S. CLINTON STREET FORT WAYNE IN 46802	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BEEKS, RENEE L 1300 S. CLINTON ST. FORT WAYNE IN 46802	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10 North Martingale Rd. Schaumburg, IL 60173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Secretary Sharon A. Gehrke 10 North Martingale Rd. Schaumburg, IL 60173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10 North Martingale Rd. Schaumburg, IL 60173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700003226917--0
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1500 Market St., Suite 3900 Philadelphia, PA 19102-2112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Sharon A. Gehrke
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sharon A. Gehrke

4/25/00

(847) 466-8439

Date

Daytime Phone #

CR2E034 (9/99)

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<u>Name</u>	<u>Title</u>
G. Philip Rossman, II Assistant Secretary	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802
James N. Westafer Assistant Secretary	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802
Walter W. Bonham, Jr. Assistant Treasurer	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802
Dawn R. Mann Assistant Treasurer	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802
Steven W. Rogers Assistant Treasurer	c/o First Penn-Pacific Life Insurance Co. 10 North Martingale Road Schaumburg, IL 60173
Eldon J. Summers Assistant Treasurer	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802

DIRECTORS

<u>Name</u>	<u>Business Address</u>
Thomas W. Fitch	c/o First Penn-Pacific Life Insurance Co. 10 North Martingale Road Schaumburg, IL 60173
Joseph J. Neuberger	c/o Lincoln National Financial Institutions Group, Inc. 9855 West 78 th Street Eden Prairie, MN 55344
Richard S. White	c/o Lincoln National Financial Institutions Group, Inc. 9855 West 78 th Street Eden Prairie, MN 55344

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ACCOUNT NO. : 072100000032

REFERENCE : 676301 7123523

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 150.00

ORDER DATE : April 26, 2000

ORDER TIME : 11:31 AM

ORDER NO. : 676301-010

CUSTOMER NO: 7123523

CUSTOMER: Ms. Sharon Gehrke
First Penn-pacific Life
1801 S. Meyers Road

Oakbrook Terrac, IL 60181

ANNUAL REPORT FILING

NAME: THE FINANCIAL RESOURCES
DEPARTMENT, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS: _____

RECEIVED
00 APR 27 PM 12:17
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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THE FINANCIAL RESOURCES DEPARTMENT, INC.
(a Michigan corporation)

157 South Kalamazoo
Mall Plaza, Suite 250
Kalamazoo, MI 49007

OFFICERS

<u>Name</u>	<u>Business Address</u>
Thomas W. Fitch Chief Executive Officer and President	c/o First Penn-Pacific Life Insurance Co. 10 North Martingale Road Schaumburg, IL 60173
Janet Chrzan Vice President and Treasurer	Centre Square, West Tower 1500 Market Street, Suite 3900 Philadelphia, PA 19102-2112
Richard S. White Vice President	c/o Lincoln National Financial Institutions Group, Inc. 9855 West 78 th Street Eden Prairie, MN 55344
Sharon A. Gehrke Secretary	c/o First Penn-Pacific Life Insurance Co. 10 North Martingale Road Schaumburg, IL 60173
Brian S. Becher Assistant Secretary	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802
Renee L. Beeks Assistant Secretary	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802
Donna J. Cooper Assistant Secretary	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802
Gloria J. Cox Assistant Secretary	c/o Lincoln National Life Insurance Co. 1300 South Clinton Street Fort Wayne, IN 46802