

2001 UNIFORM BUSINESS REPORT (UBR)

Page 1044

0587863

DOCUMENT # F93000003840

1. Entity Name

THE FINANCIAL RESOURCES DEPARTMENT, INC.

FILED

01 MAY -1 PM 6:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

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. 10 NORTH MARTINGALE ROAD SCHAUMBURG IL 60173 US
---	---

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---

City & State	City & State	4. FEI Number 38-3034551	Applied For Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET TALLAHASSEE FL 32301
--

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 _____ (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. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
--	--	---	-----------------------------

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD FITCH, THOMAS W 10 NORTH MARTINGALE RD. SCHAUMBURG IL 60173 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GEHRKE, SHARON A 10 NORTH MARTINGALE RD. SCHAUMBURG IL 60173 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT ROGERS, STEVEN W 10 NORTH MARTINGALE RD. SCHAUMBURG IL 60173 <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 1500 MARKET STREET, STE. 3900 PHILADELPHIA PA 19102-2112 <input checked="" 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 800004104668--3
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President and Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Frederick J. Crawford 1500 Market Street, Suite 3900 Philadelphia, PA 19102-2112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition T8

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 Sharon A. Gehrke 4/27/01 (847) 466-8439
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

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

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

OFFICERS

Name

Business Address

Thomas W. Fitch
Chief Executive Officer and President

10 North Martingale Road
Schaumburg, IL 60173

Frederick J. Crawford
Vice President and Treasurer

Centre Square, West Tower
1500 Market Street, Suite 3900
Philadelphia, PA 19102-2112

Richard S. White
Vice President

9855 West 78th 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

Name

James N. Westafer
Assistant Secretary

Title

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

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

Name

Thomas W. Fitch

Business Address

10 North Martingale Road
Schaumburg, IL 60173

Joseph J. Neuberger

9855 West 78th Street
Eden Prairie, MN 55344

Richard S. White

9855 West 78th Street
Eden Prairie, MN 55344



ACCOUNT NO. : 072100000032

REFERENCE : 132808 7123523

AUTHORIZATION : *Patricia T. [signature]*

COST LIMIT : \$ 150.00

ORDER DATE : April 30, 2001

ORDER TIME : 2:18 PM

ORDER NO. : 132808-010

CUSTOMER NO: 7123523

CUSTOMER: Ms. Sharon Gehrke
First Penn-pacific Life
10 North Martingale Road

Schaumburg, IL 60173-2268

ANNUAL REPORT FILING

NAME: THE FINANCIAL RESOURCES
DEPARTMENT, INC.

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 MAY - 1 PM 3:23
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - Ext. 1115

EXAMINER'S INITIALS: _____