

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001782

FILED
May 17, 2008
Secretary of State

Entity Name: MUTUAL OF OMAHA MARKETING CORPORATION

Current Principal Place of Business:

MUTUAL OF OMAHA PLAZA
OMAHA, NE 68175

New Principal Place of Business:

Current Mailing Address:

ATTN: CORPORATE SECRETARY
MUTUAL OF OMAHA PLAZA
OMAHA, NE 68175

New Mailing Address:

MUTUAL OF OMAHA PLAZA
C/O CORPORATE SECRETARY
OMAHA, NE 68175

FEI Number: 47-0709568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAVER, JOHN
Address: MUTUAL OF OMAHA PLAZA
City-St-Zip: OMAHA, NE 68175

Title: T () Delete
Name: PRAUNER, MARK
Address: MUTUAL OF OMAHA PLAZA
City-St-Zip: OMAHA, NE 67175

Title: D () Delete
Name: MORIEN, NEAL A
Address: MUTUAL OF OMAHA PLAZA
City-St-Zip: OMAHA, NE 68175

Title: D () Delete
Name: MCCUSKER, THOMAS J
Address: MUTUAL OF OMAHA PLAZA
City-St-Zip: OMAHA, NE 68175

Title: S () Delete
Name: HUSS, MICHAEL E
Address: MUTUAL OMAHA PLAZA
City-St-Zip: OMAHA, NE 68175

Title: D () Delete
Name: POWER, JOHN
Address: MUTUAL OF OMAHA PLAZA
City-St-Zip: OMAHA, NE 68175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LESLIE HAGG

AS

05/17/2008

Electronic Signature of Signing Officer or Director

Date