CR2E034 (10/00)

## FILED Apr 03, 2001 8:00 am Secretary of State **DOCUMENT # P01364** 1. Entity Name AMERICAN MEMORIAL LIFE INSURANCE COMPANY 04-03-2001 90113 050 \*\*\*150.00 Principal Place of Business Mailing Address 440 MT. RUSHMORE ROAD 440 MT. RUSHMORE ROAD P O BOX 2730 P O BOX 2730 C0041271 RAPID CITY SD 57709 RAPID CITY SD 57709 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 46-0260270 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required --- = 6. Name and Address of Current Registered Agent --\_7.\_ Name and Address of New Registered Agent THE FLORIDA INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) THE CAPITOL BUILDING TALLAHASSEE FL 33433 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12 VC, CEO, D Delete TITLE TITLE DAVIS, BRIAN E Alan W. Feagin NAME NAME STREET ADDRESS STREET ADDRESS 1929 ALLEN PKWY 10 Glenlake Parkway NE, #500 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77019** Atlanta, GA 30328-3473 TITLE TITLE ☐ Change ★ Addition Delete WALTRIP, BLAIR W NAME Robert B. Pollock NAME STREET ADDRESS STREET ADDRESS 1929 ALLEN PKWY One Chase Manhattan Plaza CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77019** New York, NY 10005 TITLE SVP7 Asst.T. D · [=] Change ★ Addition TITLE Delete NAME WADE, JOHN E NAME Richard C. Myers, Jr. STREET ADDRESS 440 MT RUSHMORE ROAD STREET ADDRESS 10 Glenlake Parkway NE, #500 CITY-ST-ZIP CITY-ST-ZIP RAPID CITY SD 57701 Atlanta, GA 30328-3473 AVTD TITLE X Delete TITLE V,T,D Change C ☐ Addition YOPP, CRAIG A NAME NAME Craig A. Yopp (title) 440 MT RUSHMORE RD STREET ADDRESS STREET ADDRESS 440 Mt. Rushmore Road CITY-ST-7IE CITY-ST-7IP RAPID CITY SD 57701 Rapid City, SD 57701 VAD ☐ Delete TITLE TITLE A.V ☐ Change ▼ Addition Daniel E. Roesler LISTER, DAVID H NAME NAME STREET ADDRESS STREET ADDRESS 440 MT RUSHMORE RD 440 Mt. Rushmore Road CITY-ST-ZIP CITY-ST-ZIP RAPID CITY SD 57701 Rapid City, SD 57701 SVGD ☐ Delete TITLE A,V TITLE Change ▼ Addition MCGUIRE, MATTHEW F NAME NAME Doulas A. Wilson STREET ADDRESS 440 MT RUSHMORE RD STREET ADDRESS 440 Mt. Rushmore Road

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.

CITY-ST-ZIP

SIGNATURE:

RAPID CITY SD 57701

CITY-ST-ZIP

Markey 50 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/30/01

Rapid City, SD 57701

605-719-0100

Daytime Phone #

2000 Uniform Business Report (UBR)
American Memorial Life Insurance Company

440 Mt. Rushmore Road Rapid City, SD 57701

12.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A,V Schultz, Tammy L.	☐ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV, Asst. Sec. Tesch, Joan J. 10 Glenlake Parkway NE, #500 Atlanta, GA 30328-3473	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A,V Pembroke, Mary Ann 440 Mt. Rüshmöre Road Rapid City, SD 57701	☐ Change	Addition     Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A,V Updike, Russell E. 440 Mt. Rushmore Road Rapid City, SD 57701	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Change	Addition .
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition

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## AMERICAN MEMORIAL LIFE INSURANCE COMPANY

## **DIRECTORS**

Robert B. Pollock, Chairman

Alan W. Feagin

David H. Lister

Matthew F. McGuire

Richard C. Myers, Jr.

Richard D. Soulek

John E. Wade

Craig A. Yopp

## **OFFICERS**

Robert B. Pollock

Chairman of the Board

Alan W. Feagin

Vice Chairman of the Board and CEO

John E. Wade

President

Matthew F. McGuire

Senior Vice President, General Counsel & Secretary

Richard C. Myers, Jr.

Senior Vice President, Assistant Treasurer

David H. Lister

Vice President & Actuary

Mary I. McCormick

Vice President, Customer Service Vice President, Finance & Treasurer

Craig A. Yopp Richard D. Soulek

Assistant Vice President of Operations

Daniel E. Roesler

Assistant Vice President, Information Services

Douglas A. Wilson

Assistant Vice President, Information Services

Tammy L. Schultz

Assistant Vice President, Marketing Support & Training

Joan J. Tesh

Assistant Vice President and Assistant Secretary

Mary Ann Pembroke

Assistant Vice President, Human Resources

Russell E. Updike

Assistant Vice President, New Program Development