

4-4-95 8-2962-0  
**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
 ANNUAL REPORT  
 1995**



**FLORIDA DEPARTMENT OF STATE**  
 Sandra B. Northam  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS**

**95 APR -4 AM 11:58**

**DOCUMENT # P02871 (2)**

1. Corporation Name

**AMERITAS INVESTMENT CORP**

Principal Place of Business

Mailing Address

**210 GATEWAY  
 STE. 200 GREENTREE COURT  
 LINCOLN NE 68505  
 US**

**210 GATEWAY  
 STE 200 GREENTREE COURT  
 LINCOLN NE 68505**

DO NOT WRITE IN THIS SPACE

2. Date Incorporated or Qualified

**07/31/1984**

3a. Date of Last Report

**05/01/1994**

4. FEI Number

**47-0663374**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
 Fee Required**

6. Election Campaign Financing  
 Trust Fund Contribution

☐

**\$5.00 May Be  
 Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,  
 Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

**21 5900 "O" STREET**

Suite, Apt. #, etc.

2a. Mailing Address

**26 5900 "O" STREET**

Suite, Apt. #, etc.

City & State

**23 LINCOLN, NE**

Zip

**24 68510**

Country

**25 USA**

City & State

**28 LINCOLN, NE**

Zip

**29 68510**

Country

**30 USA**

9. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY  
 1201 HAYS STREET  
 SUITE 105  
 TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when substituting)

DATE

12. OFFICERS AND DIRECTORS

|                 |                            |
|-----------------|----------------------------|
| TITLE           | <b>D</b>                   |
| NAME            | <b>ARTH, LAWRENCE J.</b>   |
| STREET ADDRESS  | <b>5900 "O" STREET</b>     |
| CITY - ST - ZIP | <b>LINCOLN NE</b>          |
| TITLE           | <b>V</b>                   |
| NAME            | <b>VINCENT, RODNEY K.</b>  |
| STREET ADDRESS  | <b>5900 "O" ST.</b>        |
| CITY - ST - ZIP | <b>LINCOLN NE</b>          |
| TITLE           | <b>D</b>                   |
| NAME            | <b>TYNER, NEAL E.</b>      |
| STREET ADDRESS  | <b>5900 "O" STREET</b>     |
| CITY - ST - ZIP | <b>LINCOLN NE</b>          |
| TITLE           | <b>PD</b>                  |
| NAME            | <b>SAMMET, DONALD R.</b>   |
| STREET ADDRESS  | <b>210 GATEWAY</b>         |
| CITY - ST - ZIP | <b>LINCOLN NE</b>          |
| TITLE           | <b>SD</b>                  |
| NAME            | <b>KRIVOSHA, NORMAN M.</b> |
| STREET ADDRESS  | <b>5900 "O" STREET</b>     |
| CITY - ST - ZIP | <b>LINCOLN NE</b>          |
| TITLE           | <b>TD</b>                  |
| NAME            | <b>HEADRICK, JON</b>       |
| STREET ADDRESS  | <b>210 GATEWAY</b>         |
| CITY - ST - ZIP | <b>LINCOLN NE</b>          |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                     |                          |                                                                              |
|---------------------|--------------------------|------------------------------------------------------------------------------|
| 1.1 TITLE           | <b>VS</b>                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME            | <b>Jones, Kenneth R</b>  |                                                                              |
| 1.3 STREET ADDRESS  | <b>5900 "O" Street</b>   |                                                                              |
| 1.4 CITY - ST - ZIP | <b>Lincoln, NE 68510</b> |                                                                              |
| 2.1 TITLE           | <b>VS</b>                | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME            | <b>Sackett, James S</b>  |                                                                              |
| 2.3 STREET ADDRESS  | <b>5900 "O" Street</b>   |                                                                              |
| 2.4 CITY - ST - ZIP | <b>Lincoln, NE 68510</b> |                                                                              |
| 3.1 TITLE           | <b>V</b>                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME            | <b>Bittner, Thomas C</b> |                                                                              |
| 3.3 STREET ADDRESS  | <b>5900 "O" Street</b>   |                                                                              |
| 3.4 CITY - ST - ZIP | <b>Lincoln, NE 68510</b> |                                                                              |
| 4.1 TITLE           | <b>V</b>                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 4.2 NAME            | <b>Winsor, Janell</b>    |                                                                              |
| 4.3 STREET ADDRESS  | <b>5900 "O" Street</b>   |                                                                              |
| 4.4 CITY - ST - ZIP | <b>Lincoln, NE 68510</b> |                                                                              |
| 5.1 TITLE           | <b>D</b>                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME            | <b>Louis, Kenneth C</b>  |                                                                              |
| 5.3 STREET ADDRESS  | <b>5900 "O" Street</b>   |                                                                              |
| 5.4 CITY - ST - ZIP | <b>Lincoln, NE 68510</b> |                                                                              |
| 6.1 TITLE           | <b>D</b>                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME            | <b>Martin, JoAnn M</b>   |                                                                              |
| 6.3 STREET ADDRESS  | <b>5900 "O" Street</b>   |                                                                              |
| 6.4 CITY - ST - ZIP | <b>Lincoln, NE 68510</b> |                                                                              |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 this corporation or the recorder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

**DONALD R. Sammet**

**3/3/95**

**(402) 467-7757**

**AMERITAS INVESTMENT CORP.  
OFFICERS AND DIRECTORS  
FOR YEAR ENDING DECEMBER 31, 1994**

| <u>OFFICE/TITLE</u> | <u>NAME &amp; ADDRESS</u>                             |
|---------------------|-------------------------------------------------------|
| PRESIDENT           | DONALD R. SAMMET 5900 "O" STREET, LINCOLN, NE 68510   |
| VICE PRESIDENT      | JAMES S. SACKETT 5900 "O" STREET, LINCOLN, NE 68510   |
| VICE PRESIDENT      | JANELL WINSOR 5900 "O" STREET, LINCOLN, NE 68510      |
| VICE PRESIDENT      | KENNETH R. JONES 5900 "O" STREET, LINCOLN, NE 68510   |
| SECRETARY           | NORMAN M. KRIVOSHA 5900 "O" STREET, LINCOLN, NE 68510 |
| TREASURER           | JON C. HEADRICK 5900 "O" STREET, LINCOLN, NE 68510    |
| <br>                |                                                       |
| DIRECTOR            | NEAL E. TYNER 5900 "O" STREET, LINCOLN, NE 68510      |
| DIRECTOR            | LAWRENCE J. ARTH 5900 "O" STREET, LINCOLN, NE 68510   |
| DIRECTOR            | JON C. HEADRICK 5900 "O" STREET, LINCOLN, NE 68510    |
| DIRECTOR            | NORMAN M. KRIVOSHA 5900 "O" STREET, LINCOLN, NE 68510 |
| DIRECTOR            | KENNETH C. LOUIS 5900 "O" STREET, LINCOLN, NE 68510   |
| DIRECTOR            | JOANN M. MARTIN 5900 "O" STREET, LINCOLN, NE 68510    |
| DIRECTOR            | DONALD R. SAMMET 5900 "O" STREET, LINCOLN, NE 68510   |