

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90158 029 ***150.00

DOCUMENT # P02871

1. Entity Name

AMERITAS INVESTMENT CORP

Principal Place of Business

**5900 O ST
 LINCOLN NE 68510-2234
 US**

Mailing Address

**5900 O ST
 LINCOLN NE 68510-2234
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **47-0663374**

Applied For

Not Applicable

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

**UNITED STATES CORPORATION COMPANY
 1201 HAYS STREET
 SUITE 105
 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, 2001 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	CD ARTH, LAWRENCE J. 5900 "O" STREET LINCOLN NE 68510	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPMA BITTNER, THOMAS C. 5900 "O" ST LINCOLN NE 68510	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD LOUIS, KENENTH C. 5900 "O" STREET LINCOLN NE 68510	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VRSM WINSOR, JANELL 5900 O STREET LINCOLN NE 68510	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP LOUIE, KENNETH 5900 "O" STREET LINCOLN NE 68510	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LESTER, WILLIAM J 5900 O ST LINCOLN NE 68510	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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:

[Signature]

THOMAS C. BITTNER VP-MKTG & ADMIN 4/30/2001

402 467-7715

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0600876

CR2E034 (10/00)

L0061821



DO NOT WRITE IN THIS SPACE