

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P16259 (4)

1. Corporation Name

FRONTIER NATIONAL LIFE INSURANCE COMPANY



Principal Place of Business

1001 LAKESIDE AVE.
CLEVELAND OH 44114-1195

Mailing Address

1001 LAKESIDE AVE.
CLEVELAND OH 44114-1195

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
10/06/1987

3a. Date of Last Report
05/01/1995

4. FEI Number
34-1533563

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

THE INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32301

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 individual agent and the corporation

Signature typed or printed name of Agent (signature required when changing)

Date

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
HERSHEY, BARRY, J
900 TANGLEWOOD DR
CONCORD MA

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TV
KELLY, DOUGLAS B.
38125 JACKSON RD
MORELAND HILLS OH

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S
MILLER, PETER D.
3765 MIDDLEPOST LANE
ROCKY RIVER OH

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P
GUNNING, DAVID H
2571 NORTH PARK BLVD.
CLEVELAND HEIGHTS OH

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
OSBORNE, RICHARD L
1103 ROYAL OAK DRIVE
CHAGRIN FALLS OH

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
OUTCALT, JON H.
7 BRANDYWOOD DRIVE
PEPPER PIKE OH

☐ DELETE

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96

(216) 691-6400