

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16906

FILED
Apr 18, 2012
Secretary of State

Entity Name: CONTINENTAL LIFE INSURANCE COMPANY OF BRENTWOOD, TENNESSEE

Current Principal Place of Business:

101 CONTINENTAL PLACE
BRENTWOOD, TN 37027

New Principal Place of Business:

800 CRESCENT CENTER DRIVE
SUITE 200
FRANKLIN, TN 37067

Current Mailing Address:

101 CONTINENTAL PLACE
BRENTWOOD, TN 37027

New Mailing Address:

151 FARMINGTON AVENUE
RT65
HARTFORD, CT 06156

FEI Number: 62-1181209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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

OFFICERS AND DIRECTORS:

Title: PCEO
Name: WOOLDRIDGE, TYREE S
Address: 800 CRESCENT CENTER DRIVE, SUITE 200
City-St-Zip: FRANKLIN, TN 37067

Title: CFO
Name: JONES, STEPHEN B
Address: 800 CRESCENT CENTER DRIVE, SUITE 200
City-St-Zip: FRANKLIN, TN 37067

Title: SVPS
Name: HENDRICH, STEVEN L
Address: 800 CRESCENT CENTER DRIVE, SUITE 200
City-St-Zip: FRANKLIN, TN 37067

Title: VPT
Name: COFRANCESCO, ELAINE R
Address: 151 FARMINGTON AVENUE
City-St-Zip: HARTFORD, CT 06156

Title: CONT
Name: SHELTON, BRAD E
Address: 800 CRESCENT CENTER DRIVE, SUITE 200
City-St-Zip: FRANKLIN, VA 37067

Title: VG
Name: ATCHISON, MICHAEL A
Address: 800 CRESCENT CENTER DRIVE, SUITE 200
City-St-Zip: FRANKLIN, VA 37067

I hereby 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 all other like empowered.

SIGNATURE: EDWARD C. LEE

VPAS

04/18/2012

Electronic Signature of Signing Officer or Director

Date