2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P18038 1. Entity Name

COLUMBIA UNIVERSAL LIFE INSURANCE COMPANY

Principal Place of Business

Mailing Address

11211 TAYLOR DRAPER LANE

P.O. BOX 200225

SUITE 200 **AUSTIN TX 78759** AUSTIN TX 78720-0225

US

US

1881/188/ 187 1888/ #8/1/ 08/188 18/18/ 18/18/ 08/18/ 18/18/ 18/18/ 18/18/ 18/18/ 18/18/ 18/18/ 18/18/ 18/18/

FILED

04-29-2002 90059 050 ***150.00

2. Principal Place of Business i 005 Congress Avenue 3. Mailing Address 3075 SANU					ROAD)				
Suite, Apt. #, etc. 0 STE . 825			Suite, Apt. #, etc. Ste. HIA			DO NOT WRITE IN THIS SPACE				
City & State AUSTIN, TX			City & State NONTHBASOK, TL		4. FEI Number 75-0956156			pplied For ot Applicable		
Zip 78701 Country U.S		60062 Country)	5. Certificate of Star	tus Desired	\$8.75 Add Fee Require			
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
					Name					
FLORIDA INSURANCE COMMISSIONER										
THE CAPITOL					Street Address (P.O. Box Number is Not Acceptable)					
TALLAHA	SSEE FL 32	2301								
				Ci	ty			Zip Cod	в	
.5										
8. The above	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.									
CIONATURE.										
SIGNATURE.	Signature, typed	or printed name of registered agent ar	nd title if applicable. (NOTE	: Registered Ager	t signature required	d when reinstating)	DA	TE.		
9. This corpo	oration is eligi	ible to satisfy its Intangible	FILE NOW!	!! FEE IS \$	150.00	10. Election (Campaign Financing	\$5.0	O May⋅Be_<	
		and elects to do so.	After May 1, 20	02 Fee will	be \$550.00	Truet Frin	nd Contribution.		to Fees	
(See criter	ria on back)		Make Check Payat	ole to Depar	tment of Sta	ite				
11.		OFFICERS AND D	DIRECTORS	12.		ADDITIONS/CHAN	IGES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE	COBD		Delete	TITLE	CEO			☐ Change	Addition	
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-	mortal by thorsal by				7/204	ing J. Wips	200		i	
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CITY OF 71D			DR.	STREET ADD	DRESS 3/00	SANDERS TO	10017			
CITY-ST-ZIP		MILLE FL 32224		CITY-ST-ZI	P NOR	THBROOK, IL	60062			
CITY-ST-ZIP			DR. Delete		" NOR 5/D	THBROOK, IL	60062	☐ Change	Addition	
	JACKSON	WILLE FL 32224		CITY-ST-ZI	P NOR SID MICH	<i>THBROOK, IL</i> LALL I. VLLO	TTA	☐ Change	Addition	
TITLE	JACKSON PD PINKHAM	WILLE FL 32224	Delete	CITY-ST-ZI	P NOR S/D MICA 3100	LTHBROOK, TL LALL J. VLLD SANDURS,	TTA ROAD	☐ Change	Addition	
TITLE NAME	JACKSON PD PINKHAM	MILLE FL 32224 , MIKE YLOR DRAPER LANE, S	Delete	CITY-ST-ZI TITLE NAME	P NOR S/D MICA 3100	LTHBROOK, TL LALL J. VLLD SANDURS,	TTA ROAD	☐ Change	Addition	
TITLE 'NAME STREET ADDRESS	JACKSON PD PINKHAM 11211 TA AUSTIN T	MILLE FL 32224 , MIKE YLOR DRAPER LANE, S	⊠ Delete	CITY-ST-ZI TITLE NAME STREET ADD	P NOR S/D MICA 3100	<i>THBROOK, IL</i> LALL I. VLLO	TTA ROAD	☐ Change	Addition Addition	
TITLE 'NAME STREET ADDRESS CITY-ST-ZIP TITLE	JACKSON PD PINKHAM 11211 TA AUSTIN T VPT	IVILLE FL 32224 , MIKE YLOR DRAPER LANE, S X 78759	Delete	CITY-ST-ZI TITLE NAME STREET ADD CITY-ST-ZI	NOR S/D MICA MICA NOR V/D	ITHBROOK, IL LALL I. VLLO SANDURS, ITHBROOK, IL	177A 177A 1204D 126062			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	JACKSON PD PINKHAM 11211 TA AUSTIN T VPT ATHENS,	MILLE FL 32224 , MIKE YLOR DRAPER LANE, S X 78759 ZACK G.	Delete UITE 200 Delete	CITY-ST-ZI TITLE NAME STREET ADE CITY-ST-ZI TITLE NAME	P NOR S/D MICA 3100 P NOR V/D MAR	LTHBROOK, IL LALL I. VLLO SANDURS, LTHBROOK, IL LA G. FRIEL	177A 177A 1204D 1-60062 1004N			
TITLE 'NAME STREET ADDRESS CITY-ST-ZIP TITLE	JACKSON PD PINKHAM 11211 TA AUSTIN T VPT ATHENS, 1121 TAY	MILLE FL 32224 , MIKE YLOR DRAPER LANE, S X 78759 ZACK G. LOR DRAPER LANE, SU	Delete UITE 200 Delete	CITY-ST-ZI TITLE NAME STREET ADD CITY-ST-ZI	P NOR 5/D MICA 3/00 NOR V/D MARA ORESS 3/00	ITHBROOK, IL (ALL I. V4LD SANDURS, ITHBROOK, IL LA Gr. FRIED SANDURS RO	C 60062 177A 1204D C 60062 DUAN 14D			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	JACKSON PD PINKHAM 11211 TA AUSTIN T VPT ATHENS, 1121 TAY AUSTIN T VP FORMAN, 11211 TA AUSTIN T S JOY J. LL 11211 TA AUSTIN T SVP ALLEN, FI	MILLE FL 32224 , MIKE YLOR DRAPER LANE, S X 78759 ZACK G. LOR DRAPER LANE, SU X 78759 BRIAN D. YLOR DRAPER LANE, S X 78759 OYD YLOR DRAPER LANE, S X 78759	Delete UITE 200 Delete UITE 200 Delete UITE 200 Delete UITE 200 Delete UITE 200	CITY-ST-ZI TITLE NAME STREET ADD CITY-ST-ZI TITLE	P NOR SID NOR STEN SIDESS SIDE	THBROOK, ILL LALL J. VLLO SANDLAS, THBROOK, ILL SANDLAS RO THBROOK, ILL SANDLAS RO THBROOK, ILL SANDLAS RO THBROOK, ILL SANDLAS THBROOK, ILL ULL H. FILL SSANDLAS	177A 177A 180AD 1 60062 181K 180AD 180AD 180AD 180AD 180AD 180AD 180AD 180AD 180AD 180AD	☐ Change ☐ Change	Addition Addition	

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.

Lynn Cirrincione

SIGNATURE:

Authorized Representative

CR2E034 (9/01)