

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

04-23-2002 90355 007 \*\*\*150.00

**DOCUMENT # P37601**

1. Entity Name  
**LNC ADMINISTRATIVE SERVICES CORPORATION**

Principal Place of Business

**ONE REINSURANCE PLACE  
 1700 MAGNAVOX WAY  
 FORT WAYNE IN 46804  
 US**

Mailing Address

**P. O. BOX 7808  
 FT. WAYNE IN 46801-7808  
 US**

**80074294**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**35-1844946**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
 110 NORTH MAGNOLIA STREET  
 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, 2002 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  
**CPD  
 ROWLAND, LAWRENCE T.  
 1700 MAGNAVOX WAY  
 FORT WAYNE IN** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**SEE LIST  
 ATTACHED** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**SVPD  
 ALFORD, TIMOTHY J  
 1700 MAGNAVOX WAY  
 FT. WAYNE IN 46804** ☒ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**SVTD  
 TYLER, WILLIAM K  
 1700 MAGNAVOX WAY  
 FORT WAYNE IN 46804** ☒ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPGC  
 PROSSER, RAYMOND L  
 1700 MAGNAVOX WAY  
 FORT WAYNE IN 46804** ☒ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPAT  
 CAMPOLA, PATSY  
 7300 CORPORATE CENTER DR STE., #200  
 MIAMI FL 33321** ☒ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**S  
 ROSE, CYNTHIA A  
 1300 SOUTH CLINTON STREET  
 FORT WAYNE IN 46802** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☒ Change ☐ 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.

SIGNATURE:

**SIGNATURE REQUIRED**  
**JOEL A. ETINGER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**215-255-2889**

Daytime Phone #

CR2E034 (9/01)

Attachment  
DH BW 7494

## LNC ADMINISTRATIVE SERVICES CORPORATION

### DIRECTORS

NAME	BUSINESS ADDRESS
David K. Downes	One Commerce Square 2005 Market Street, 30 <sup>th</sup> Floor Philadelphia, PA 19103-7094
Richard J. Flannery	One Commerce Square 2005 Market Street, 34 <sup>th</sup> Floor Philadelphia, PA 19103-7094
Charles E. Haldeman, Jr.	One Commerce Square 2005 Market Street, 39 <sup>th</sup> Floor Philadelphia, PA 19103-7094

### EXECUTIVE OFFICERS

NAME	TITLE	BUSINESS ADDRESS
David K. Downes (DOB: 01/08/40)	Chairman/Chief Executive Officer/President	One Commerce Square 2005 Market Street, 30 <sup>th</sup> Floor Philadelphia, PA 19103-7094
Rene M. Campis (DOB: 01/15/53)	Executive Vice President	One Commerce Square 2005 Market Street, 30 <sup>th</sup> Floor Philadelphia, PA 19103-7094
Richard J. Flannery (DOB: 09/30/57)	Executive Vice President/General Counsel/Chief Administrative Officer	One Commerce Square 2005 Market Street, 34 <sup>th</sup> Floor Philadelphia, PA 19103-7094
Diane M. Anderson (DOB: 08/22/51)	Senior Vice President/Retirement Operations	1818 Market Street, 16 <sup>th</sup> Floor Philadelphia, PA 19103
Lisa O. Brinkley (DOB: 09/14/59)	Senior Vice President/ Compliance Director	One Commerce Square 2005 Market Street, 34 <sup>th</sup> Floor Philadelphia, PA 19103-7094
Joseph H. Hastings (DOB: 12/19/49)	Senior Vice President/ Treasurer/Controller	One Commerce Square 2005 Market Street, 9 <sup>th</sup> Floor Philadelphia, PA 19103-7094
Joanne O. Hutcheson (DOB: 12/25/49)	Senior Vice President/Human Resources	One Commerce Square 2005 Market Street, 30 <sup>th</sup> Floor Philadelphia, PA 19103-7094
Richelle S. Maestro (DOB: 11/26/57)	Senior Vice President/Deputy General Counsel/Secretary	One Commerce Square 2005 Market Street, 34 <sup>th</sup> Floor Philadelphia, PA 19103-7094