2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 811341

Entity Name: CONSTITUTION LIFE INSURANCE COMPANY

Current Principal Place of Business:

1064 GREENWOOD BLVD.

SUITE 260

LAKE MARY, FL 32746

Current Mailing Address:

P.O. BOX 958465

LAKE MARY, FL 32795-8465 US

FEI Number: 36-1824600 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER

200 E. GAINES ST

TALLAHASSEE, FL 32399-0000 US

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

FILED Mar 29, 2016

Secretary of State

CC8228356998

Officer/Director Detail:

Title VPS Title VP

Name CARLTON, STEVE Name COCHRANE, CARL L

Address 1064 GREENWOOD BLVD Address 1064 GREENWOOD BLVD

SUITE 260 SUITE 260

City-State-Zip: LAKE MARY FL 32746 City-State-Zip: LAKE MARY FL 32746

Title DCFO Title PRESIDENT, DIRECTOR

Name CANNONE, RICHARD M Name BARASCH, RICHARD A
Address 1064 GREENWOOD BLVD Address 44 SOUTH BROADWAY

SUITE 260 SUITE 1200

City-State-Zip: LAKE MARY FL 32746 City-State-Zip: WHITE PLAINS NY 10601

Title DIRECTOR

Name WOLK, ANTHONY L

Address 44 SOUTH BROADWAY

SUITE 1200

City-State-Zip: WHITE PLAINS NY 10601

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: STEVE L CARLTON

Electronic Signature of Signing Officer/Director Detail

SECRETARY

03/29/2016 Date