2019 FOREIGN PROFIT	CORPORATION ANNUAL REPORT

DOCUMENT# 843870

Entity Name: DEARBORN NATIONAL LIFE INSURANCE COMPANY

Current Principal Place of Business:

300 EAST RANDOLPH STREET CHICAGO, IL 60601-5099

Current Mailing Address:

701 EAST 22ND STREET LOMBARD, IL 60148 US

FEI Number: 36-2598882

Name and Address of Current Registered Agent:

LYNETTE COLEMAN C/O CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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	E: LYNETTE COLEMAN		04/03/2019
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title Name Address City-State-Zip:	PRESIDENT & CEO & DIRECTOR WITWER, MICHAEL W 701 EAST 22ND STREET LOMBARD IL 60148	Title Name Address City-State-Zip:	TREASURER, VP OF FINANCE AND COMPLIANCE MANAGEMENT BURKE, CLAIRE C 701 EAST 22ND STREET, SUITE 300 LOMBARD IL 60148
Title Name Address City-State-Zip:	GENERAL COUNSEL & SECRETARY CHANDLER, ERIC R 701 EAST 22ND STREET LOMBARD IL 60148	Title Name Address City-State-Zip:	CHAIRMAN & DIRECTOR FRANK, MICHAEL E 3645 ALICE STREET
Title Name Address City-State-Zip:	DIVISION VP, CHIEF ACTUARY, APPOINTED ACTUARY SCHWEGEL, JOHN G 701 EAST 22ND STREET LOMBARD IL 60148	Title Name Address City-State-Zip:	
Title Name Address City-State-Zip:	DIRECTOR MCDONALD, CARL R 300 EAST RANDOLPH STREET CHICAGO IL 60601-5099	Title Name Address City-State-Zip:	DIRECTOR FOLZ, RALPH C 701 EAST 22ND STREET LOMBARD IL 60148

Continues on page 2

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: ERIC R. CHANDLER

GC & SECRETARY

04/03/2019

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 03, 2019 Secretary of State 3768113892CC

Certificate of Status Desired: Yes

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	MCCANN, JAMES F	Name	WOLFF, SHERMAN M
Address	701 EAST 22ND STREET	Address	701 EAST 22ND STREET
City-State-Zip:	LOMBARD IL 60148	City-State-Zip:	LOMBARD IL 60148