

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 846950

Entity Name: WESTERN RESERVE LIFE ASSURANCE CO., OF OHIO**Current Principal Place of Business:**570 CARILLON PARKWAY
ST. PETERSBURG, FL 33716-1202**Current Mailing Address:**4333 EDGEWOOD RD NE
CEDAR RAPIDS, IA 52499 US**FEI Number:** 43-1162657**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
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

Officer/Director Detail :

Title D, P, COB
Name CLANCY, BRENDA K
Address 4333 EDGEWOOD ROAD NE
City-State-Zip: CEDAR RAPIDS IA 52499

Title SVP
Name GEIGER, WILLIAM H
Address 570 CARILLON PKWY.
City-State-Zip: SAINT PETERSBURG FL 33716

Title TVP
Name WRIGHT, KAREN R
Address 400 WEST MARKET ST.
City-State-Zip: LOUISVILLE KY 40202

Title D& SVP
Name SCHNEIDER, ARTHUR C
Address 4333 EDGEWOOD RD. NE
City-State-Zip: CEDAR RAPIDS IA 52499

Title D & SVP
Name KATWIJK, C. MICHIEL VAN
Address 4333 EDGEWOOD RD NE
City-State-Zip: CEDAR RAPIDS IA 52499

Title SVP & AS
Name VERMIE, CRAIG D
Address 4333 EDGEWOOD RD NE
City-State-Zip: CEDAR RAPIDS IA 52499

Title D
Name HAM, SCOTT W
Address 4333 EDGEWOOD RD NE
City-State-Zip: CEDAR RAPIDS IA 52499

Title D
Name HUNTER, JOHN R
Address 4333 EDGEWOOD RD NE
City-State-Zip: CEDAR RAPIDS IA 52499

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: CRAIG D VERMIE**SENIOR VICE PRESIDENT 04/30/2013**

Electronic Signature of Signing Officer/Director Detail

Date