

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 857717

Entity Name: LINCOLN FINANCIAL DISTRIBUTORS, INC.**Current Principal Place of Business:**130 NORTH RADNOR CHESTER ROAD
RADNOR, PA 19087**Current Mailing Address:**C/O CHERRY WHITAKER
350 CHURCH STREET
HARTFORD, CT 06103**FEI Number:** 06-0841987**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PCEO
Name	FULLER, WILL
Address	150 NORTH RADNOR CHESTER ROAD
City-State-Zip:	RADNOR PA 19087

Title	SECRETARY
Name	SMITH, NANCY A
Address	150 N. RADNOR CHESTER ROAD
City-State-Zip:	RADNOR PA 19087

Title	TREA
Name	COUTTS, JEFFREY C
Address	150 NORTH RADNOR CHESTER ROAD
City-State-Zip:	RADNOR PA 19087

Title	DIRECTOR
Name	POTOCHAR, CHRISTOPHER
Address	150 N. RADNOR CHESTER ROAD
City-State-Zip:	RADNOR PA 19087

Title	VP
Name	CAULFIELD, PATRICK J
Address	350 CHURCH STREET
City-State-Zip:	HARTFORD CT 06103

Title	AVP
Name	WHITAKER, CHARITO C
Address	350 CHURCH STREET, MLB1
City-State-Zip:	HARTFORD CT 06103

Title	DIRECTOR
Name	BUCKLEE, ANDREW
Address	130 N. RADNOR CHESTER RD
City-State-Zip:	RADNOR PA 19087

Title	DIRECTOR
Name	KENNEDY, JOHN
Address	130 N. RADNOR CHESTER ROAD
City-State-Zip:	RADNOR PA 19087

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: CHARITO WHITAKER

AVP

01/28/2016

Electronic Signature of Signing Officer/Director Detail_____
Date