2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 857933

Entity Name: LINCOLN BENEFIT LIFE COMPANY

Current Principal Place of Business:

2940 SOUTH 84TH ST LINCOLN. NE 68506

Current Mailing Address:

3075 SANDERS RD

STE H1E

NORTHBROOK, IL 60062-7127

FEI Number: 47-0221457 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 Apr 30, 2014

Secretary of State

CC8967281517

Officer/Director Detail:

Title CEO Title SEC

NameCIVGIN, DOGANNameFONTANA, ANGELA KAddress3100 SANDERS ROADAddress3100 SANDERS ROADCity-State-Zip:NORTHBROOK IL 60062City-State-Zip:NORTHBROOK IL 60062

Title TR Title SVP

NameRIZZO, MARIONameGREFFIN, JUDITH PAddress3075 SANDERS ROADAddress2775 SANDERS ROADCity-State-Zip:NORTHBROOK IL 60062City-State-Zip: NORTHBROOK IL 60062

Title SGVP Title DR

NamePILCH, SAMUEL HNameMERTEN, JESSEAddress3075 SANDERS ROADAddress3100 SANDERS ROAD,City-State-Zip:NORTHBROOK IL 60062City-State-Zip: NORTHBROOK IL 60062

Title AUTHORIZED REPRESENTATIVE

Name CIRRINCIONE, LYNN
Address 3075 SANDERS ROAD
City-State-Zip: NORTHBROOK IL 60062

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: LYNN CIRRINCIONE

AUTHORIZED REPRESENTATIVE 04/30/2014