

05-01-2002 91562 034 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **857933**
 1. Entity Name
LINCOLN BENEFIT LIFE COMPANY

U B R 0 0 0

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2940 SOUTH 84th ST.
 Suite, Apt. #, etc.

3. Mailing Address
3075 SANDERS ROAD
 Suite, Apt. #, etc.
H1A

DO NOT WRITE IN THIS SPACE

City & State
LINCOLN, NE

City & State
NORTHBROOK, IL

Zip
68506 Country
US

Zip
60062 Country
US

4. FEI Number
47-0221457

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
 Name **INSURANCE COMMISSIONER**
 Street Address (P.O. Box Number is Not Acceptable)
THE CAPITOL
 City **TALLAHASSEE** FL Zip Code **32301**

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when resigning)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
 (See criteria on back)

January 1 - May 1 Fee is \$150.00
 After May 1 Fee is \$550.00
 Amended UBR is \$61.25
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO/D THOMAS J. WILSON, II 3100 SANDERS ROAD NORTHBROOK, IL 60062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SID MICHAEL J. VELOTTA 3100 SANDERS ROAD NORTHBROOK, IL 60062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARLA G FRIEDMAN 3100 SANDERS ROAD NORTHBROOK, IL 60062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STEVEN E. SHEBIK 3100 SANDERS ROAD NORTHBROOK, IL 60062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President/CONTROLLER SAMUEL H. PILCH 3075 SANDERS ROAD NORTHBROOK, IL 60062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President/Treasurer JAMES P. ZILS 3075 SANDERS ROAD NORTHBROOK, IL 60062

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Lynn Cirrincione**

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lynn Cirrincione
 Authorized Representative

Date **4/10/02** Daytime Phone # **(847) 402-3029**