

1.) CORPORATION NAME:

**THE CHESAPEAKE LIFE INSURANCE COMPANY**

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F0133654**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMA	40
COMB	40

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**OK**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9151 BOULEVARD 26  
ATTN: PEGGY G SIMPSON

CITY/ST/ZIP: NORTH RICHLAND HILLS, TX 76180

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	KENNETH J FASOLA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIR PRES CEO		
ADDRESS:	9151 BOULEVARD 26		
CITY/ST/ZIP/CO:	N RICHLAND HILLS, TX 76180		
NAME:	M FRANKLIN JACKSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	9151 BOULEVARD 26		
CITY/ST/ZIP/CO:	NORTH RICHLAND HILLS, TX 76180		
NAME:	RICHARD E BIERMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SVP GEN COUNSEL		
ADDRESS:	9151 BOULEVARD 26		
CITY/ST/ZIP/CO:	NORTH RICHLAND HILLS, TX 76180		
NAME:	DERRICK A DUKE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP/COO/T		
ADDRESS:	9151 BOULEVARD 26		
CITY/ST/ZIP/CO:	NORTH RICHLAND HILLS, TX 76180		
NAME:	SUSAN E DEW	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	9151 BOULEVARD 26		
CITY/ST/ZIP/CO:	NORTH RICHLAND HILLS, TX 76180		
NAME:	PEGGY GIBBONS SIMPSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	9151 BOULEVARD 26		
CITY/ST/ZIP/CO:	NORTH RICHLAND HILLS, TX 76180		

NAME: R SCOTT DONOVAN TITLE: EVP/CFO ADDRESS: 9151 BOULEVARD 26 CITY/ST/ZIP/CO: NORTH RICHLAND HILLS, TX 76180	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: MARK H SMITH TITLE: DIRECTOR ADDRESS: 9151 BOULEVARD 26 CITY/ST/ZIP/CO: NORTH RICHLAND HILLS, TX 76180	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: THOMAS A LUCHETTA TITLE: SVP ADDRESS: 9151 BOULEVARD 26 CITY/ST/ZIP/CO: NORTH RICHLAND HILLS, TX 76180	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: CONNIE PALACIOS TITLE: SVP CONTROLLER ADDRESS: 9151 BOULEVARD 26 CITY/ST/ZIP/CO: NORTH RICHLAND HILLS, TX 76180	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.				
/s/ PEGGY GIBBONS SIMPSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PEGGY GIBBONS SIMPSON, SECRETARY PRINTED NAME AND CORPORATE TITLE	2/5/2013 DATE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.				