

1.) CORPORATION NAME:

DUE DATE: **4/30/2012**

WESTERN RESERVE LIFE ASSURANCE CO. OF OHIO

SCC ID NO: **F0384349**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.
AUTH IN VI
CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 366 E BROAD ST
C/O ANDREW FEDERICO

CITY/ST/ZIP: COLUMBUS, OH 43215-

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	BRENDA K CLANCY	
TITLE:	PRESIDENT	
ADDRESS:	4333 EDGEWOOD ROAD NE	
CITY/ST/ZIP/CO:	CEDAR RAPIDS, IA 52499-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ARTHUR C SCHNEIDER	
TITLE:	SR VP/CTO	
ADDRESS:	4333 EDGEWOOD ROAD NE	
CITY/ST/ZIP/CO:	CEDAR RAPIDS, IA 52499-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CRAIG D VERMIE	
TITLE:	AST SEC/SR VP	
ADDRESS:	4333 EDGEWOOD ROAD NE	
CITY/ST/ZIP/CO:	CEDAR RAPIDS, IA 52499-1202	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KAREN R WRIGHT	
TITLE:	TREASURER	
ADDRESS:	400 WEST MARKET STREET	
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40202-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CHARLES T BOSWELL	
TITLE:	DIRECTOR	
ADDRESS:	570 CARILLON PARKWAY	
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716-	

NAME:	DARRYL D BUTTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4333 EDGEWOOD ROAD NE		
CITY/ST/ZIP/CO:	CEDAR RAPIDS, IA 52499-		

NAME:	JOHN R HUNTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4333 EDGEWOOD ROAD NE		
CITY/ST/ZIP/CO:	CEDAR RAPIDS, IA 52499-		

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.

<u>/s/ CRAIG D VERMIE</u>	<u>CRAIG D VERMIE, AST SEC/SR VP</u>	<u>3/14/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.