

1.) CORPORATION NAME:

**CONTINENTAL LIFE INSURANCE COMPANY OF
BRENTWOOD, TENNESSEE**

DUE DATE: **3/31/2014**

SCC ID NO: **F1099565**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 800 Crescent Centre Drive
Suite 200

CITY/ST/ZIP: Franklin, TN 37067

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:	Tyree Scott Wooldridge	
TITLE:	President/CEO	
ADDRESS:	800 Crescent Centre Drive Suite 200	
CITY/ST/ZIP/CO:	Franklin, TN 37067	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Steven Louis Hendrich	
TITLE:	Sec./SVP/GC	
ADDRESS:	800 Crescent Centre Drive Suite 200	
CITY/ST/ZIP/CO:	Franklin, TN 37067	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Michael Allen Atchison	
TITLE:	SVP	
ADDRESS:	800 Crescent Centre Drive Suite 200	
CITY/ST/ZIP/CO:	Franklin, TN 37067	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Elaine Rose Cofrancesco	
TITLE:	VP/TREASURER	
ADDRESS:	800 Crescent Centre Drive Suite 200	
CITY/ST/ZIP/CO:	Franklin, TN 37067	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Stephen Burnett Jones	
TITLE:	CFO	
ADDRESS:	800 Crescent Centre Drive Suite 200	
CITY/ST/ZIP/CO:	Franklin, TN 37067	

NAME:	Brad Everett Shelton	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	800 Crescent Centre Drive		
	Suite 200		
CITY/ST/ZIP/CO:	Franklin, TN 37067		

NAME:	Edward Chung-I Lee	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/Asst. Sec.		
ADDRESS:	800 Crescent Centre Drive		
	Suite 200		
CITY/ST/ZIP/CO:	Franklin, TN 37067		

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/ Edward Chung-I Lee	Edward Chung-I Lee, VP/Asst. Sec.	2/5/2014
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.