No. C 209425		Due no later than Apr 30, 2018		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		12550 W 575	CORPORATION SERVICE COMPANY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. LIFEMAP ASSURANCE COMPANY 100 SW MARKET ST ATTN LEGAL DEPARTMENT PORTLAND OR 97201		BOISE ID 8	12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pro	esident, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JAMES J SWAYZE		100 SW MARKET STREET	PORTLAND	OR	USA	97201	
PRESIDENT	CHRISTOPHER G BLANTON		100 SW MARKET STREET	PORTLAND	OR		97201	
DIRECTOR	VINCE P PRICE		100 SW MARKET STREET	PORTLAND	OR	USA	97201	
DIRECTOR	SCOTT D KREILING		100 SW MARKET STREET	PORTLAND	OR	USA	97201	
DIRECTOR	MARK B GANZ		100 SW MARKET STREET	PORTLAND	OR	USA	97201	
DIRECTOR	ANGELA M DOWLING		100 SW MARKET STREET	PORTLAND	OR	USA	97201	
SECRETARY JOHN W ATTEY 100 SW MARKET STREET PORTLAND OR USA 9720						97201		
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
OR C 209425		Signature: JOHN W. ATTEY			Date: 04/25/2018			
		Name (type or p		Title: SECRETARY				
Processed 04/25/2018 * Electronically provided signatures are accepted as original signatures.								