No. <b>C 70554</b>		Due no later than Aug 31, 2007		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		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.  LINCOLN NATIONAL INSURANCE ASSOCIATES, INC.  BRAD A JEFFREY  350 CHURCH ST MLAI  HARTFORD CT 06103		1401 SHORELINE DR STE 2 BOISE ID 83702  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Na	mes and Busin	ess Addresses of Presi	dent, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	DENNIS R GLASS		2005 MARKET STREET 30TH FLOOR	PHILADELPHIA	PA	USA	19103
DIRECTOR	FREDERICK J CRAWFORD		1500 MARKET STREET 39TH FLOOR	PHILADELPHIA	PA	USA	19102
TREASURER	RANDAL J FREITAG		100 NORTH GREENE STREET	GREENSBORO	NC	USA	27401
PRESIDENT	ROBERT W. DINEEN		2005 MARKET STREET 34TH FLOOR	PHILADELPHIA	PA	USA	19103
SECRETARY	MARILYN K.	ONDECKER	1300 SOUTH CLINTON STREET	FORT WAYNE	IN	USA	46802
DIRECTOR	ROBERT W.	DINEEN	2005 MARKET STREET 34TH FLOOR	PHILADELPHIA	PA	USA	19103
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
CT C 70554		Signature: Brad A Jeffrey		Date: 08/24/2007			
		Name (type or print): Brad A Jeffrey		Title: Assistant Vice President			
Processed 08/24/2007 * Electronically provided signatures are accepted as original signatures.							