

**2001 UNIFORM BUSINESS REPORT (UBR)**

Page 1 of 2

0624615

**DOCUMENT # 425333**  
 1. Entity Name  
**BANKERS LIFE INSURANCE COMPANY**

**FILED**

**01 APR 30 PM 5:49**

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
 P.O. BOX 15707 P.O. BOX 15707  
 ST PETERSBURG FL 33702-2256 ST PETERSBURG FL 33702-2256

2. Principal Place of Business 3. Mailing Address  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 City & State City & State

4. FEI Number **59-1460067** Applied For  
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**STATE INSURANCE COMMISSIONER  
 THE CAPITOL  
 TALLAHASSEE FL FL 32304**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DELANO, G. KRISTIN DS 360 CENTRAL AVE ST PETERSBURG FL 33701 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEEHAN, DAVID K <del>DS</del> 360 CENTRAL AVE ST PETERSBURG FL 33701 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUNTER, BILL 360 CENTRAL AVE ST PETERSBURG FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HUSSEMAN, EDWIN C <del>DS</del> 360 CENTRAL AVE ST PETERSBURG FL 33701 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>DS</del> MENKE, ROBERT M <del>DS</del> 360 CENTRAL AVE ST PETERSBURG FL 33701 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENKE, ROBERT G <del>DS</del> 360 CENTRAL AVE ST PETERSBURG FL 33701 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>300004212519</b> -05/11/01--01114--001 ***7381.50 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-VC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert G. Southey Robert G. Southey 4-23-2001 (727) 823-4000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

**BANKERS LIFE INSURANCE COMPANY**

D - C	NYE, DAVID J.	360 Central Avenue	St. Petersburg, FL
D	MIXSON, J. WAYNE	360 Central Avenue	St. Petersburg, FL
D	FROID, GARY	360 Central Avenue	St. Petersburg, FL
D	STRONG, JOHN A.	360 Central Avenue	St. Petersburg, FL
D - P	PIERCE, DOUGLAS P.	360 Central Avenue	St. Petersburg, FL
SVP	RECK, STEPHEN L.	360 Central Avenue	St. Petersburg, FL
V - AS	SOUTHEY, ROBERT G.	360 Central Avenue	St. Petersburg, FL
V	PEAT, BARBARA A.	360 Central Avenue	St. Petersburg, FL
V	SWENSON, ANDREW J.	360 Central Avenue	St. Petersburg, FL
V	MEEHAN, MICHAEL P.	360 Central Avenue	St. Petersburg, FL
V	FISCHER, RUSSELL A.	360 Central Avenue	St. Petersburg, FL
V	MAKOWSKI, BRIAN T.	360 Central Avenue	St. Petersburg, FL
V	DOUVILLE, STEVEN A.	360 Central Avenue	St. Petersburg, FL
V	HECKLER, LYNN A.	360 Central Avenue	St. Petersburg, FL