


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90271 016 ***150.00

DOCUMENT # 425333			
1. Entity Name BANKERS LIFE INSURANCE COMPANY			
Principal Place of Business 360 CENTRAL AVE. ST PETERSBURG, FL 33701		Mailing Address 360 CENTRAL AVE. ST PETERSBURG, FL 33701	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-1460067		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HAIRE, NANCY C 360 CENTRAL AVE ST. PETERSBURG, FL 33701 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEEHAN, DAVID K 360 CENTRAL AVE ST PETERSBURG, FL 33701 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDS HUSSEMAN, EDWIN C 360 CENTRAL AVE ST PETERSBURG, FL 33701 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENKE, ROBERT M 360 CENTRAL AVE ST PETERSBURG, FL 33701 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PIERCE, DOUGLAS B 360 CENTRAL AVE SAINT PETERSBURG, FL 33701 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Nancy C. Haire</u> Nancy C. Haire, Asst. Secretary		4/1/2005 727-823-4000 Date Daytime Phone #	

ATTACHMENT

40059335

425333

BANKERS LIFE INSURANCE COMPANY

Exhibit to Uniform Business Report (UBR)

2005

DC	David J. Nye	5119 SW 103 Drive	Gainesville, FL 32608
D	J. Wayne Mixson	2219 Demeron Road	Tallahassee, FL 32308
D	John A. Strong	2323 Kirkpatrick Place	Greensboro, NC 27408
D	William Van Syckle	7 Rock Ridge Lane	Stamford, CT 06903
EVP	Brian L. Keefer	360 Central Avenue	St. Petersburg, FL 33701
SVP	Russell A. Fischer	360 Central Avenue	St. Petersburg, FL 33701
SVP	Barbara A. Peat	360 Central Avenue	St. Petersburg, FL 33701
VP	William M. Gray, II	360 Central Avenue	St. Petersburg, FL 33701
VP	Edito M. Gill	360 Central Avenue	St. Petersburg, FL 33701
VP	Janet H. Till	360 Central Avenue	St. Petersburg, FL 33701
AS	Stephanie D. Trudel	360 Central Avenue	St. Petersburg, FL 33701