

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

DOCUMENT # 807069		Cost Center: 0		DATE: 7/21/05 21 PM 4:27	
1. Entity Name BANKERS LIFE AND CASUALTY COMPANY		Company: 3		Karl W. Kindig	
Principal Place of Business 11815 N. PENNSYLVANIA ST. CARMEL, IN 46032		Mailing Address 11815 N. PENNSYLVANIA STREET DEPT. A2A CARMEL, IN 46032 US		TALLAHASSEE, FLORIDA 30010762	
2. Principal Place of Business		3. Mailing Address 11815 N. PENNSYLVANIA ST.		DO NOT MAIL Put in folder for pick up Cost Center 3001 and 3002 Mary Ann Ray 01032005 Chg-P	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State CARMEL, IN			
Zip	Country	Zip	Country	4. FEI Number 38-0770740	Applied For <input type="checkbox"/> Not Applicable
		46032	USA	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 32399-0000				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	PD <input checked="" type="checkbox"/> Delete	TITLE	P/CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CHARLES W. WELLS	NAME	WILLIAM S. KIRSCH		
STREET ADDRESS	11815 N. PENNSYLVANIA STREET	STREET ADDRESS	11815 N. PENNSYLVANIA ST.		
CITY-ST-ZIP	CARMEL, IN 46032	CITY-ST-ZIP	CARMEL, IN 46032		
TITLE	CFOD <input checked="" type="checkbox"/> Delete	TITLE	CFOD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	JOHN M. SQUAROK	NAME	JOHN M. SQUAROK		
STREET ADDRESS	222 MERCHANDISE MART PLAZA	STREET ADDRESS	222 MERCHANDISE MART PLAZA		
CITY-ST-ZIP	CHICAGO, IL 60654	CITY-ST-ZIP	CHICAGO, IL 60654		
TITLE	S <input checked="" type="checkbox"/> Delete	TITLE	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	KARL W. KINDIG	NAME	KARL W. KINDIG		
STREET ADDRESS	11815 N. PENNSYLVANIA ST.	STREET ADDRESS	11815 N. PENNSYLVANIA ST.		
CITY-ST-ZIP	CARMEL, IN 46032	CITY-ST-ZIP	CARMEL, IN 46032		
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DANIEL J. MURPHY	NAME	DANIEL J. MURPHY		
STREET ADDRESS	11815 N. PENNSYLVANIA ST.	STREET ADDRESS	11815 N. PENNSYLVANIA ST.		
CITY-ST-ZIP	CARMEL, IN 46032	CITY-ST-ZIP	CARMEL, IN 46032		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RONALD F. RUHL	NAME	RONALD F. RUHL		
STREET ADDRESS	11815 N. PENNSYLVANIA ST	STREET ADDRESS	11815 N. PENNSYLVANIA ST.		
CITY-ST-ZIP	CARMEL, IN 46032	CITY-ST-ZIP	CARMEL, IN 46032		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	EUGENE M. BULLIS	NAME	EUGENE M. BULLIS		
STREET ADDRESS	11815 N. PENNSYLVANIA ST	STREET ADDRESS	11815 N. PENNSYLVANIA ST.		
CITY-ST-ZIP	CARMEL, IN 46032	CITY-ST-ZIP	CARMEL, IN 46032		
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>Karl W. Kindig</u>		KARL W. KINDIG, SECRETARY		2-1-2005 817-817-6000	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

ATTACHMENT

BANKERS LIFE AND CASUALTY COMPANY

H819288
50010762

Directors

- Bullis, Eugene M.
- *Morisato, Susan C.
- Ruhl, Ronald F.
- *Squarok, John M.
- *Veto, Daniel J.

Officers

Name	Title
Kirsch, William S.	President and Chief Executive Officer
Perry, Scott R.	Executive Vice President and Chief Operating Officer
*Squarok, John M.	Executive Vice President and Chief Financial Officer
Burkett, Jr., Robert E.	Senior Vice President, Legal and Assistant Secretary
Devanney, Jr., William T.	Senior Vice President, Corporate Taxes
Johnson, Eric R.	Senior Vice President, Investments
Kindig, Karl W.	Senior Vice President, Legal and Secretary
*Morisato, Susan C.	Senior Vice President, Actuarial
Murphy, Daniel J.	Senior Vice President and Treasurer
Short, Jr., K. Lowell	Senior Vice President, Finance
*Veto, Daniel J.	Senior Vice President, Strategy and Marketing
Wells, John W.	Senior Vice President, Operations
Crafton, James M.	Vice President, Statutory Reporting
Crampton, James C.	Vice President, Corporate Taxes
Hofmann, Helen L.	Vice President, Actuarial
Humm, David D.	Vice President, Corporate Taxes
Neavins, Thomas K.	Vice President, Actuarial
Nellis, Wayne R.	Vice President
*Valdez, James J.	Vice President, Associate General Counsel and Assistant Secretary
Kirk, Jill A.	Second Vice President, Actuarial
Aklinski, Dennis C.	Assistant Vice President

The address for the Directors and Officers marked with * is 222 Merchandise Mart Plaza, Chicago, IL 60654. The address for the remaining Directors and Officers is 11815 N. Pennsylvania St., Carmel, IN 46032.