

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996 2 28 96 B-1654 NC

DOCUMENT # **812116** (2)
1. Corporation Name
SAFECO LIFE INSURANCE COMPANY



Principal Place of Business: **15411 NE 51 STREET, REDMOND WA 98052, US**
Mailing Address: **15411 NE 51 STREET, REDMOND WA 98052, US**

3. Date Incorporated or Qualified: **08/03/1957**
3a. Date of Last Report: **01/26/1995**
4. FEI Number: **91-0742147**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
21. Sube, Apt. #, etc.
22. City & State
23. Zip Country
24. Zip Country

9. Name and Address of Current Registered Agent
**INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent
B1. Name
B2. Street Address (P.O. Box Number is Not Acceptable)
B3.
B4. City
B5. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	AS	<input type="checkbox"/> DELETE
NAME	EGAN, RAY M	
STREET ADDRESS	SAFECO PLAZA	
CITY- ST- ZIP	SEATTLE WA	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	KNEBEL, MICHAEL C	
STREET ADDRESS	15411 NE 51 STREET	
CITY- ST- ZIP	REDMOND WA	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	PIERSON, RODNEY A	
STREET ADDRESS	SAFECO PLAZA	
CITY- ST- ZIP	SEATTLE, WASHINGTON00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCLEAN, DAN D	
STREET ADDRESS	SAFECO PLAZA	
CITY- ST- ZIP	SEATTLE, WASHINGTON00000	
TITLE	CBD	<input type="checkbox"/> DELETE
NAME	EIGSTI, ROGER H	
STREET ADDRESS	SAFECO PLAZA	
CITY- ST- ZIP	SEATTLE WA	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	ZUNKER, RICHARD E	
STREET ADDRESS	15411 NE 51ST ST	
CITY- ST- ZIP	REDMOND WA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ray M. Egan 2/23/96 (800) 544-2614
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Ray M. Egan - Asst. Secretary Date: _____ Daytime Phone: _____

CR2E034 (12/95)

SAFECO LIFE INSURANCE COMPANY

Roger Eigsti	* Chairman of Board
Richard E. Zunker	* President
Boh A. Dickey	* Sr. Vice President
John Fenlason	Sr. Vice President
Roger Harbin	Sr. Vice President/Actuary
Rodney A. Pierson	* Sr. Vice President/Secretary
F. Gregory Clarke	Vice President
James T. Flynn	Vice President/Controller/Asst. Secretary
I. Richard Green	Vice President
Michele M. Kemper	Vice President
Michael Kinzer	Vice President, Chief Actuary
Michael C. Knebel	Vice President, Treasurer
Allie Mysliwy	Vice President
George C. Pagos	Vice President, Associate General Counsel, Asst. Secretary
Craig J. Schmidt, MD	Vice President
Ron Spaulding	* Vice President
Scott Taylor	Vice President
Michael R. Tucker	Vice President
John F. Beck	Region Vice President
Deon P. Wiechmann	Region Vice President
Stephen D. Collier	Asst. Secretary
Ray M. Egan	Asst. Secretary
Sheridan Hollender	Asst. Secretary
David W. Kraft	Asst. Secretary
Paul Lowber	Asst. Secretary
George Yonker	Asst. Secretary
Bradford K. Young	Asst. Secretary
Clifton H. Anderson	Asst. Vice President
Jennifer Davies	Asst. Vice President
Richard Ford	Asst. Vice President
Dale Johnson	Asst. Vice President
Pat McCormick	Asst. Vice President
Gregory W. Parker	Asst. Vice President
Wayne A. Rothmeyer	Asst. Vice President/Actuary (Sts.)
Marc Shaner	Asst. Vice President
Henry A. Shields	Asst. Vice President
Paul A. Stevenson	Asst. Vice President
Judy Walter	Asst. Vice President
Douglas E. Ward	Asst. Vice President
Michael P. Healy	Actuary
Charles H. Heiberg	Actuary
William C. Huff	Actuary
Jean B. Liebmann	Actuary
James A. Mankin	Actuary
Donald S. Chapman	*
Dan D. McLean	*
James W. Ruddy	*
Robert W. Swegle	*

* Denotes Director