FILE	NOW: FILING FEE	AFTER MAY 1 IS	\$225.00		
PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortharn Secretary of State DIVISION OF CORPORATIONS			LPg.183
DOCUMENT # J44312 (3)					
1. Corporation		` ,			
J.M.I.C.	LIFE INSURANCE COMPA	NY		 	I IAN BIBN BIBN BIBN BIBN BIBN BIBN BIBN
Principal Place of Business Making Address					
100 NW 12TH AVE. DEERFIELD BEACH FL 33442-1702		100 NW 12TH AVE. LEGAL DEPT DEERFIELD BEACH FL 33442-1702 US			
				3. Date incorporated or Qualified 11/26/1986	3a. Date of Last Report 05/01/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt. #	1 etc	Suite, Apt. #, etc.		86-0367818	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
Oity & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζiρ	Country	Ziρ	Country	8. This corporation has liability for	
24 .	25 9. Name and Address of Curren		30	Florida Statutes Yes 10. Name and Address of New F	□ No Registered Agent
			81 Name		
	NCE COMMISSIONER		82 Street Addr	ess (P.O. Box Number is Not Acceptat	ole)
	PITOL BUILDING ASSEE FL 32301		83		
			84 City		85 Zip Code
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named corpor	ration submits this statement for the pu	rpose of changing its registered office
or registere	ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	 Such change was authorized 	by the corporation's boar	rd of directors. I hereby accept the app	ointment as régistered agent. I am
SIGNATURE _	Signature, typen or printed careerof registered agost	ared tipe Capain af is	Bag stored Agent signar recreasing	1 when the state of	DATE
12.	OFFICERS AND	DIRECTORS	13.	A COLOR DE LA COLO	ICERS AND DIRECTORS IN 12
THLE	DP DEDUZZI DAVID	☐ DELETE	1.13HLE	1 11 11	? ☐ Change ☐ Addition
NAME STREET ADDRESS	reduzzi, david 100 n.w. 12th avenue		1.2 NAME 1.3 STREET ADURESS	wattrehed &	ac.
CHTY-ST ZIP	DEERFIELD BEACH FL		14 CITY-S1-2IF	•	
THTLE	DV	DELETE	2 1 TITLE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change Addition
NAME	HAYES, C. STEVEN		2.2 NAME		
STREET ADDRESS	100 N.W. 12TH AVENUE DEERFIELD BEACH FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D DECIMIED DESCRIPTE	[T] DELETE	2 4 C/TY - ST - Z/P 3 1 T TLE		Change Addition
NAME	RICH, LAWRENCE S.		3.2 NAME		
STREET ADDRESS	100 N.W. 12TH AVENUE		3.3 STREET ADDRESS		
CITY - ST - ZIP	DEERFIELD BEACH FL		3.4 C:1Y - ST - Z IP		
TIFLE	D DATES OF C	DELETE	4 1 FiTLE	7000017	Change Addition
NAME	MORAN, PATRICIA G. 100 N.W. 12TH AVENUE		4.2 NAME	-07/25/9601	020006
STREET ADDRESS	DEERFIELD BEACH FL		4.3 STREET ADDRESS 4.4 CITY - ST - ZiP	###2 00.0 0	
CITY-SI-2IP TITLE	D DECIMIED OCACITY	DE:ETE	5 1 TITLE		Change Addition
NAME	FLORENCE, GERALD M.		5.2 NAME		- · · · -
STREET ADORESS	100 N.W. 12TH AVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL		5.4 CITY - ST - ZIP		
TIFLE	S MALIELANI TOUNI I	□ DELETE	6 3 THUE		☐ Change ☐ Addition
NAME	WHELAN, JOHN J		6.2 NAMe		

OEERFIELD BCH FL

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 armual report or supplemental aimual 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 chapped, or on an attachmienty with any address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

100 NW 12TH AVE

THE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

\$ 120/96 (954) 489->010

Rev: 2/29/96

JMIC LIFE INSURANCE COMPANY

1996 FLORIDA CORPORATION ANNUAL REPORT

LIST OF ADDITIONAL OFFICERS & DIRECTORS

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

TITLE

NAME

ADDRESS

CITY, STATE ZIP CODE

P/D

Reduzzi, Dave

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

D

Moran, Patricia Genevieve

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

D

Rich, Lawrence Smith

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

D

Florence, Gerald M.

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

D/V

Hayes, Carl Steven

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

EV/GC

Brown, Colin

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

S

Whelan, John J.

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

Т

Gunnell, Casey L.

100 N.W. 12th Ave.

Deerfield Beach, FL 33442

Page 2
JMIC Life Insurance Co.
Additional Officers and Directors

TITLE
NAME
ADDRESS
CITY, STATE ZIP CODE

AV Curran, William 100 N.W. 12th Ave. Deerfield Beach, FL 33442

AV Taylor, Donald 100 N.W. 12th Ave. Deerfield Beach, FL 33442

AV Williams, James D. 100 N.W. 12th Ave. Deerfield Beach, FL 33442

AT McWilliams, Donna 100 N.W. 12th Ave. Deerfield Beach, FL 33442