2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J44312

FILED Apr 30, 2009 Secretary of State

Entity Nar	ne: J.M.I.C.	LIFE INSUF	RANCE COMPANY						
Current Principal Place of Business:					New Principal Place of Business:				
	ORAN BLVD. D BEACH, F								
Current Mailing Address:					New Mailing Address:				
LEGAL DE	ORAN BLVD. PT MAIL DRI D BEACH, F	OP JMFDF	018 US						
FEI Number:	86-0367818	FEI Num	ber Applied For()	FEI Nun	nber Not Appli	cable ()	Certifica	ate of Status Desire	d()
Name and	Address of	Current Re	egistered Agent:		Name and	Address o	f New Reg	jistered Agent:	
THE CAPI	CE COMMISS TOL BUILDIN SSEE, FL 323	IG							
	named entity of Florida.	submits th	is statement for the p	urpose o	f changing it	s registere	d office or r	egistered agent,	or both,
SIGNATUR	RE:								
	Electro	nic Signatu	re of Registered Age	nt				Date	
Election Can	npaign Financi	ng Trust Fun	d Contribution ().						
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD (HEATHCOTT 100 JIM MOR DEERFIELD E	AN BLVD			Title: Name: Address: City-St-Zip:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	VATD (MCWILLIAMS 100 JIM MOR DEERFIELD E	AN BLVD	3442		Title: Name: Address: City-St-Zip:	DCOO COOMBS, F 100 JIM MO DEERFIELD		. ,	
Title: Name: Address: City-St-Zip:	VP (WILLIAMS, JA 100 JIM MOR DEERFIELD E	AN BLVD	3442		Title: Name: Address: City-St-Zip:	DCFO CURRAN, W 100 JIM MO DEERFIELD			
Title: Name: Address: City-St-Zip:	D (BROWN, COL 100 JIM MOR DEERFIELD E	AN BLVD.	3442		Title: Name: Address: City-St-Zip:	100 JIM MO	(X) Change IS, DONNA C RAN BLVD. BEACH, FL		
Title:	vcs () Delete			Title:	VGCS	(X) Change	() Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

GUTTUSO, MARIA K

100 JIM MORAN BLVD.

DEERFIELD BEACH, FL 33442

SIGNATURE: MARIA K GUTTUSO VGCS 04/30/2009

GUTTUSO, MARIA K

100 JIM MORAN BLVD.

DEERFIELD BEACH, FL 33442

Name:

Address:

City-St-Zip: