

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 03, 2005**  
**Secretary of State**

DOCUMENT# P03919

**Entity Name:** WOODMEN OF THE WORLD AND/OR ASSURED LIFE ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

9777 S. YOSEMITE ST. #200  
LONE TREE, CO 80124 US

**New Principal Place of Business:**

**Current Mailing Address:**

9777 S. YOSEMITE ST., #200  
LONE TREE, CO 80124 US

**New Mailing Address:**

**FEI Number:** 84-0356870      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: WHEELER, GARY R  
Address: 2522 E COUNTY ROAD 36  
City-St-Zip: FORT COLLINS, CO 80528 US

Title: P ( ) Delete  
Name: VAUGHN, DALE  
Address: 5496 SOUTH TIBET STREET  
City-St-Zip: AURORA, CO 800156515 US

Title: S ( ) Delete  
Name: CHRISTENSEN, JEROME L  
Address: 4202 DEER WATCH DR  
City-St-Zip: CASTLE ROCK, CO 80104 US

Title: D ( ) Delete  
Name: FOREMAN, LANCE C  
Address: 911 WEST KETTLE AVENUE  
City-St-Zip: LITTLETON, CO 80120 US

Title: D ( ) Delete  
Name: NORBY-WRIGHT, EBBA L  
Address: 1001 STRATHMORE DRIVE  
City-St-Zip: MODESTO, CA 953554431 US

Title: D ( ) Delete  
Name: KIRBY, RICHARD  
Address: 5468 TOWER ROAD  
City-St-Zip: RIVERSIDE, CA 92506

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: MULLER, DIANE  
Address: 10529 JAGUAR DRIVE  
City-St-Zip: LITTLETON, CO 80124 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEROME L. CHRISTENSEN

S

01/03/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date