

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03919

FILED
Feb 16, 2011
Secretary of State

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

Current Principal Place of Business:

8000 E MAPLEWOOD AVE
SUITE 105
ENGLEWOOD, CO 80111 US

New Principal Place of Business:

Current Mailing Address:

8000 E MAPLEWOOD AVE
SUITE 105
ENGLEWOOD, CO 80111 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: PT
Name: WHEELER, GARY R
Address: 1532 SANDY LANE
City-St-Zip: WINDSOR, CO 80550 US

Title: SV
Name: MULLER, DIANE
Address: 10529 JAGUAR DR
City-St-Zip: LITTLETON, CO 80124 US

Title: V
Name: CHRISTENSEN, JEROME L
Address: 4202 DEER WATCH DRIVE
City-St-Zip: CASTLE ROCK, CO 80104 US

Title: C
Name: OURY, DOUGLAS H
Address: 1667 COUNTY ROAD 5221
City-St-Zip: TABERNASH, CO 80478 US

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

Title: D
Name: UNREIN-MARRS, TANYA S
Address: 875 CONDOR ROAD
City-St-Zip: EATON, CO 80614

I hereby 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 all other like empowered.

SIGNATURE: GARY R WHEELER

PT

02/16/2011

Electronic Signature of Signing Officer or Director

Date