

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 835043 (1)

1. Corporation Name

MID-WEST NATIONAL LIFE INSURANCE COMPANY OF TENN
ESSEE

Principal Place of Business

501 W I-44 SERVICE RD
SUITE 400
OKLAHOMA CITY OK 73118
US

Mailing Address

501 W I-44 SERVICE RD
STE 400
OKLAHOMA CITY OK 73118
US



2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

STATE INSURANCE COMMISSIONER
CAPITOL BLDG.
TALLAHASSEE FL.

3. Date Incorporated or Qualified

09/17/1975

3a. Date of Last Report

03/01/1995

4. FEI Number

62-0724538

Applied For

Not Applicable

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and firm if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
	PD	WOELKE, VERNON	4001 MC EWEN, SUITE 200 DALLAS TX	
	VSD	VLACH, ROBERT B.	4001 MC EWEN, SUITE 200 DALLAS TX	
	VD	PENDOLA, EMMANUEL J	4001 MC EWEN, SUITE 200 DALLAS TX	
	T	HAUPTMAN, MARK D.	4001 MC EWEN, SUITE 200 DALLAS TX	
	VD	PRATER, CHARLES T	501 W I-44 SERVICE RD, STE 400 OKLAHOMA CITY OK	
	V	O'CONNOR, WILLIAM J.	4001 MC EWEN SUITE 200 DALLAS TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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:

Mark D. Hauptman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark D. Hauptman 1/26/96 (214) 960-8497

Date

Daytime Phone #

CR2E034 (12/95)