

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 11, 2008 8:00 am**  
**Secretary of State**

01-11-2008 90058 001 \*\*\*150.00

<b>DOCUMENT # P09206</b> 1. Entity Name <b>ONEAMERICA SECURITIES, INC.</b>					
Principal Place of Business <b>ONE AMERICAN SQUARE</b> <b>PO BOX 1984</b> <b>INDIANAPOLIS, IN 46206</b>			Mailing Address <b>ONE AMERICAN SQUARE</b> <b>PO BOX 1984</b> <b>INDIANAPOLIS, IN 46206</b>		
2. Principal Place of Business - No P.O. Box # <b>One American Sq.</b>		3. Mailing Address <b>One American Sq.</b>		<div style="font-size: 24px; font-weight: bold; margin-bottom: 10px;">40001450</div> <div style="margin-top: 10px;">             01022008    Chg-P    CR2E034 (12/06) </div>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. <b>PO Box 1984</b>			
City & State <b>Indianapolis, IN</b>		City & State <b>Indianapolis, IN</b>			
Zip <b>46206</b> Country <b>USA</b>		Zip <b>46206</b> Country <b>USA</b>			
4. FEI Number <b>35-1159900</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required				6. Name and Address of Current Registered Agent <b>CORPORATION SERVICE COMPANY</b> <b>1201 HAYS STREET</b> <b>TALLAHASSEE, FL 32301-2525</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>				8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		DATE _____	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FILING, NICHOLAS ONE AMERICAN SQUARE (P.O. BOX 368) INDIANAPOLIS, IN 46206 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD Drew B. Wieder One American Square P.O. Box 368 Indianapolis, IN 46206 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CBOD FILING, NICHOLAS ONE AMERICAN SQUARE PO BOX 368 INDIANAPOLIS, IN 46206 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Thomas M. Zurek One American Square P.O. Box 368 Indianapolis, IN 46206 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SWEAR, JOHN C ONE AMERICAN SQUARE PO BOX 368 INDIANAPOLIS, IN 46206 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD Mark A. Wilkerson One American Square P.O. Box 368 Indianapolis, IN 46206 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD KELLETT, JAMES ONE AMERICAN SQUARE PO BOX 368 INDIANAPOLIS, IN 46206 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPI ZEIGLER, JOHN W ONE AMERICAN SQUARE PO BOX 368 INDIANAPOLIS, IN 46206 <input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPI LUND, CONSTANCE E ONE AMERICAN SQUARE PO BOX 368 INDIANAPOLIS, IN 46206 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO LUND, CONSTANCE E ONE AMERICAN SQUARE PO BOX 368 INDIANAPOLIS, IN 46206 <input type="checkbox"/> Delete	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE			Nicholas A. Filing    1/3/08		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date    Daytime Phone #</small>		

**Exhibit A**  
**OneAmerica Securities, Inc.**  
**Directors and Officers**  
as of 1/2/2008

# ATTACHMENT

40001450  
#P09206

Directors		Address
Name	Position	
Constance E. Lund	Director	One American Sq, PO Box 368, Indianapolis, IN 46206
Nicholas A. Filing	Director	One American Sq, PO Box 368, Indianapolis, IN 46206
Mark A. Wilkerson	Director	One American Sq, PO Box 368, Indianapolis, IN 46206
William F. Yoerger	Director	One American Sq, PO Box 368, Indianapolis, IN 46206
Position		Address
Name		
Nicholas A. Filing	President & Chairman	One American Sq, PO Box 368, Indianapolis, IN 46206
Constance E. Lund	Treasurer	One American Sq, PO Box 368, Indianapolis, IN 46206
Thomas M. Zurek	Secretary	One American Sq, PO Box 368, Indianapolis, IN 46206
Mark A. Wilkerson	VP Ind Mktg Services	One American Sq, PO Box 368, Indianapolis, IN 46206
John W. Zeigler	VP Insurance Agency Registrations	One American Sq, PO Box 368, Indianapolis, IN 46206
Drew B. Wieder	VP Operations	One American Sq, PO Box 368, Indianapolis, IN 46206
Peggy A. Bennett	Chief Compliance Officer	One American Sq, PO Box 368, Indianapolis, IN 46206