2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#810980

FILED Apr 16, 2010 Secretary of State

Entity Name: LOYAL AMERICAN LIFE INSURANCE COMPANY

Current Principal Place of Business: New Principal Place of Business:

11200 LAKELINE BLVD. STE. 100

AUSTIN, TX 78717 US

Current Mailing Address: New Mailing Address:

PO BOX 26580

AUSTIN, TX 78755 US

FEI Number: 63-0343428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST

TALLAHASSEE, FL 323990000 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD

Name: HILL, BILLY B JR Address: 4117 CANOAS DR. City-St-Zip: AUSTIN, TX 78730

Title: [

 Name:
 MUETHING, MARK F

 Address:
 250 E. 5TH ST.-10TH FLR

 City-St-Zip:
 CINCINNATI, OH 45202

Title:

 Name:
 SCHEPER, CHARLES R

 Address:
 250 E. 5TH ST.-10TH FLR

 City-St-Zip:
 CINCINNATI, OH 45202

Title:

Name: BUESCHER, BYRON K Address: 6505 YAUPON DR. City-St-Zip: AUSTIN, TX 78759

Title:

Name: HARDISON, BRENDA W

Address: 11200 LAKELINE BLVD. STE. 100

City-St-Zip: AUSTIN, TX 78717

Title:

 Name:
 LIDNER, STEPHEN C

 Address:
 250 EAST FIFTH ST.

 City-St-Zip:
 CINCINNATI, OH 45202

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BYRON K BUESCHER T 04/16/2010