

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 425333

Entity Name: BANKERS LIFE INSURANCE COMPANY

Current Principal Place of Business:

11101 ROOSEVELT BLVD N
ST PETERSBURG, FL 33716

Current Mailing Address:

11101 ROOSEVELT BLVD N
ST PETERSBURG, FL 33716 US

FEI Number: 59-1460067

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32399 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

Officer/Director Detail :

Title SECRETARY
Name TORRA, RICHARD G
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR, PRESIDENT
Name MARTIN, WILBUR L IV
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name STRONG, JOHN A
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name REED, DAVID H
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name PARKER, CONNIE S
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name DEVINE, TED T
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR, VP
Name ROBERTS, DONALD B
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title VP
Name BARBER, IAN B
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

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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: IAN BARBER

SENIOR VICE PRESIDENT 04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name TOWNSEND, SVETLANA V
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name KESNECK, BRIAN J
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name ARENA, ANNA
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title CHIEF INTERNAL AUDITOR
Name BROWN , LIZ
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title CFO
Name BOAKYE, LYDIA
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name MENKE, BRETT M
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name GOETTMAN, JEFFREY
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title CHIEF ACTUARY
Name ZALESKI, RONALD
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716

Title COO
Name GILROY, YONG
Address 11101 ROOSEVELT BLVD N
City-State-Zip: ST PETERSBURG FL 33716