

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 825413

**Entity Name:** EQUITRUST LIFE INSURANCE COMPANY**Current Principal Place of Business:**227 WEST MONROE STREET,  
SUITE 4800  
CHICAGO, IL 60606**Current Mailing Address:**401 PENNSYLVANIA PARKWAY  
SUITE 300  
INDIANAPOLIS, IN 46280 US**FEI Number:** 42-1468417**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER  
BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 32399-0000 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 DIRECTOR  
Name BERNSTEIN, JEFFREY A  
Address 227 W MONROE STREET  
SUITE 4900  
City-State-Zip: CHICAGO IL 60606

Title TREASURER  
Name PURVIS, JAMES D  
Address 401 PENNSYLVANIA PARKWAY  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46280

Title PRESIDENT  
Name HOLOMAN, ERIC L  
Address 910 WILSHIRE BLVD., SUITE 700  
City-State-Zip: BEVERLY HILLS CA 90212

Title SECRETARY  
Name FOORMAN, JAMES L  
Address 227 W MONROE STREET  
SUITE 4900  
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR  
Name CULLEN, DENNIS A  
Address 227 W MONROE STREET  
SUITE 4900  
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR  
Name HOLOMAN, ERIC L  
Address 9100 WILSHIRE BLVD., SUITE 700  
City-State-Zip: BEVERLY HILLS CA 90212

Title DIRECTOR  
Name RIGERT, MICHAEL J  
Address 227 W MONROE STREET  
SUITE 4900  
City-State-Zip: CHICAGO IL 60606

*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:** JAMES L. FOORMAN**SECRETARY****04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date