

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850210

Entity Name: AMERICAN FINANCIAL SECURITY LIFE INSURANCE COMPANY**FILED**
Feb 23, 2014
Secretary of State
CC5959319026**Current Principal Place of Business:**120 SOUTH CENTRAL AVENUE
SUITE 400
CLAYTON, MO 63105**Current Mailing Address:**55 NE 5TH AVENUE, SUITE 502
BOCA RATON, FL 33432 US**FEI Number:** 44-0617151**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
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	PRESIDENT, CEO	Title	CHAIRMAN, TREASURER
Name	CAMILLERI, MICHAEL	Name	SONNENBERG, MICHAEL
Address	55 NE 5TH AVENUE 502	Address	100 GARDEN CITY PLAZA 102
City-State-Zip:	BOCA RATON FL 33432	City-State-Zip:	GARDEN CITY NY 11530
Title	SECRETARY	Title	CFO
Name	GREEN, MELINDA E	Name	MALONEY, JOHN
Address	55 NE 5TH AVENUE 502	Address	55 NE 5TH AVENUE 502
City-State-Zip:	BOCA RATON FL 33432	City-State-Zip:	BOCA RATON FL 33432
Title	DIRECTOR	Title	DIRECTOR
Name	SONNENBERG, CAROL	Name	PICKEN, JAMES M
Address	100 GARDEN CITY PLAZA 102	Address	55 NE 5TH AVENUE 502
City-State-Zip:	GARDEN CITY NY 11530	City-State-Zip:	BOCA RATON FL 33432
Title	DIRECTOR	Title	DIRECTOR
Name	SERNA, ERIC	Name	GREEN, MICHAEL
Address	55 NE 5TH AVENUE 502	Address	55 NE 5TH AVENUE 502
City-State-Zip:	BOCA RATON FL 33432	City-State-Zip:	BOCA RATON FL 33432

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: MICHAEL CAMILLERI**PRESIDENT****02/23/2014**

Electronic Signature of Signing Officer/Director Detail

Date