

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005275

Entity Name: USABLE LIFE INSURANCE COMPANY

Current Principal Place of Business:

320 WEST CAPITOL, 7TH FLOOR
LITTLE ROCK, AR 72201

Current Mailing Address:

PO BOX 1650
LITTLE ROCK, AR 72203-1650

FEI Number: 71-0505232

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST.
BOX 6200 32314-6200
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 CEO, PRESIDENT
Name MANN, JASON D
Address PO BOX 1650
City-State-Zip: LITTLE ROCK AR 72201

Title CFO, TREASURER
Name LANGSTON, MARK
Address PO BOX 1650
City-State-Zip: LITTLE ROCK AR 72201

Title SECRETARY
Name CREASMAN, WILLIAM
Address PO BOX 1650
City-State-Zip: LITTLE ROCK AR 72203-1650

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: WILLIAM CREASMAN

SECRETARY

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date