

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000002999

**Entity Name:** BANKERS LIFE ADVISORY SERVICES, INC.

**Current Principal Place of Business:**

111 E WACKER DR #2100  
CHICAGO, IL 60601

**FILED**  
**Apr 26, 2018**  
**Secretary of State**  
**CC7905454208**

**Current Mailing Address:**

11825 N PENNSYLVANIA ST  
CARMEL, IN 46032

**FEI Number: 47-1590388**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 D, P, CFO  
Name WEBB, WILLIAM JR  
Address 11321 LAURA LANE  
City-State-Zip: FRANKFORT IL 60423

Title EVP, D  
Name HELDING, ERIK M  
Address 3250 WHISPERING PINES LANE  
City-State-Zip: CARMEL IN 46032

Title T  
Name KIRCHER, JEFFREY M  
Address 11825 N PENNSYLVANIA STREET  
City-State-Zip: CARMEL IN 46032

Title S  
Name ROBERTS, ALBERTA  
Address 14027 PONDVIEW DR  
City-State-Zip: CARMEL IN 46032

*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: ALBERTA ROBERTS**

**SECRETARY**

**04/26/2018**

Electronic Signature of Signing Officer/Director Detail

Date