2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11387

Entity Name: LIFE OF THE SOUTH INSURANCE COMPANY

Current Principal Place of Business:

2350 PRINCE AVENUE
BUILDING 1, SUITE 4
ATHENS, GA 30603

Current Mailing Address:

10151 DEERWOOD PARK BLVD
BLDG 100 STE 330
JACKSONVILLE, FL 32256

FEI Number: 58-1458103

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH,LTD.,INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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:	KRISTIE TOLLIVER		03/22/2017
	Electronic Signature of Registered Agent		Date

Officer/Director Detail :

Title	CEO, CHAIRMAN, PRESIDENT, DIRECTOR	Title	SECRETARY
Name	KAHLBAUGH, RICHARD S	Name	ROMAINE, CHRISTOPHER D
Address	10151 DEERWOOD PARK BLVD BLDG 100 STE 330	Address	10151 DEERWOOD PARK BLVD BLDG 100 STE 330
City-State-Zip:	JACKSONVILL FL 32256	City-State-Zip:	JACKSONVILLE FL 32256

Title	DIRECTOR	Title	DIRECTOR
Name	SKINNER, MALCOLM	Name	MCCAW, JOSEPH
Address	PO BOX 1464	Address	10151 DEERWOOD PARK BLVD BLDG 100 STE 330
City-State-Zip:	ATHENS GA 30603	City-State-Zip:	JACKSONVILLE FL 32256

Title	TREASURER, DIRECTOR
Name	VRBAN, MICHAEL
Address	10151 DEERWOOD PARK BLVD BLDG 100 STE 330
City-State-Zip:	JACKSONVILLE FL 32256

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: RICHARD KAHLBAUGH	PRESIDENT	03/22/2017
Electronic Signature of Signing Officer/Director Detail		Date