

# 2002 UNIFORM BUSINESS REPORT (UBR)

0451318 AV

DOCUMENT # **425333**

1. Entity Name  
**BANKERS LIFE INSURANCE COMPANY**

FILED

02 APR 11 AM 9:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
P.O. BOX 15707  
ST PETERSBURG FL 33702-2256

Mailing Address  
P.O. BOX 15707  
ST PETERSBURG FL 33702-2256

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country Zip Country

4. FEI Number **59-1460067**  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**STATE INSURANCE COMMISSIONER  
THE CAPITOL  
TALLAHASSEE FL FL 32304**

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	HECKLER, LYNN A	
STREET ADDRESS	360 CENTRAL AVE	
CITY-ST-ZIP	ST PETERSBURG FL 33701	
TITLE	D	<input type="checkbox"/> Delete
NAME	MEEHAN, DAVID K	
STREET ADDRESS	360 CENTRAL AVE	
CITY-ST-ZIP	ST PETERSBURG FL 33701	
TITLE	D	<input type="checkbox"/> Delete
NAME	GUNTER, BILL	
STREET ADDRESS	360 CENTRAL AVE	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HUSSEMAN, EDWIN C	
STREET ADDRESS	360 CENTRAL AVE	
CITY-ST-ZIP	ST PETERSBURG FL 33701	
TITLE	D	<input type="checkbox"/> Delete
NAME	MENKE, ROBERT M	
STREET ADDRESS	360 CENTRAL AVE	
CITY-ST-ZIP	ST PETERSBURG FL 33701	
TITLE	D	<input type="checkbox"/> Delete
NAME	MENKE, ROBERT G	
STREET ADDRESS	360 CENTRAL AVE	
CITY-ST-ZIP	ST PETERSBURG FL 33701	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Haire, Nancy C.	
STREET ADDRESS	360 Central Ave.	
CITY-ST-ZIP	St. Petersburg, FL 33701	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Israel, Jason J.	
STREET ADDRESS	360 Central Ave.	
CITY-ST-ZIP	St. Petersburg, FL 33701	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nancy C. Haire Nancy C. Haire 3/15/02 727 823-4000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Assistant Secretary Date Daytime Phone #

CR2E034 (9/01)

**Bankers Life Insurance Company**

**Exhibit to Uniform Business Report (UBR)**

**2002**

D	Mixson, J. Wayne	360 Central Avenue	St. Petersburg, FL
D, C	Nye, David J.	360 Central Avenue	St. Petersburg, FL
D, P, CEO	Pierce, Douglas B.	360 Central Avenue	St. Petersburg, FL
SVP	Reck Stephen L.	360 Central Avenue	St. Petersburg, FL
VP, S	Southey, Robert G.	360 Central Avenue	St. Petersburg, FL
D	Strong, John A.	360 Central Avenue	St. Petersburg, FL
VP	Douville, Steven A.	360 Central Avenue	St. Petersburg, FL
VP	Fischer, Russell A.	360 Central Avenue	St. Petersburg, FL
VP	Peat, Barbara A.	360 Central Avenue	St. Petersburg, FL
VP	Meehan, Michael P.	360 Central Avenue	St. Petersburg, FL
AS	Snyder, David B.	360 Central Avenue	St. Petersburg, FL