

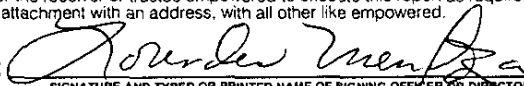


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2007 8:00 am**  
**Secretary of State**

04-26-2007 90215 039 \*\*\*150.00

<b>DOCUMENT # 808044</b> 1. Entity Name <b>GOVERNMENT PERSONNEL MUTUAL LIFE INSURANCE COMPANY</b>					
Principal Place of Business 2211 NE LOOP 410 SAN ANTONIO, TX 78217			Mailing Address P.O. BOX 659567 SAN ANTONIO, TX 78265 US		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		04112007 Chg-P CR2E034 (12/06)	
Zip Country		Zip Country		4. FEI Number 74-0651020	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HUTCHINS, PAMELA A 2211 NE LOOP 410 SAN ANTONIO, TX 78217	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOFFMAN, WILLIAM M. 2211 NE LOOP 410 SAN ANTONIO, TX 78217	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD HENNESSY, P.J. III 2211 NE LOOP 410 SAN ANTONIO, TX 78217	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOOD, M. W. 2211 NE LOOP 410 SAN ANTONIO, TX 78217	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK BODDY, ROY 221 NE LOOP 410 SAN ANTONIO, TX 78217	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS FERGUSON, C.A. 2211 NE LOOP 410 SAN ANTONIO, TX 78217	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			4/16/07 210-357-2222		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

40083798

ATTACHMENT

#808044

GOVERNMENT PERSONNEL MUTUAL LIFE INSURANCE COMPANY

GPM LIFE Building, 2211 N.E. Loop 410, P.O. Box 659567, San Antonio, Texas 78265-9567

(210) 357-2222 Fax (210) 357-6722 (800) 938-4765

April 11, 2007

STATE OF FLORIDA  
ADDENDUMS

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
L. MENDOZA	TD	2211 NE LOOP 410, SAN ANTONIO, TX
J.M. DENTON	VD	2211 NE LOOP 410, SAN ANTONIO, TX
N.T. JACO	D	2211 NE LOOP 410, SAN ANTONIO, TX
J.R. REED	D	2211 NE LOOP 410, SAN ANTONIO, TX
E. E. HABIGER	D	2211 NE LOOP 410, SAN ANTONIO, TX