

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

96 APR 29 PM 1:43

DOCUMENT # 809325 (4)

1. Corporation Name

ALL AMERICAN LIFE INSURANCE COMPANY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
8501 WEST HIGGINS ROAD
CHICAGO IL 60631

Mailing Address
3600 ROUTE 66
JUMPING BROOK CORPORATE PARK
NEPTUNE NJ 07754-1580
US

3. Date Incorporated or Qualified
05/04/1953

3a. Date of Last Report
03/02/1995

4. FEI Number
36-2148702

Applied For
Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

30

9. Name and Address of Current Registered Agent

CHERNOFF, MICHAEL
8548 NORTH DALE MABRY HIGHWAY
TAMPA FL 33614

10. Name and Address of New Registered Agent

81 Name
CT Corporation

82 Street Address (P.O. Box Number is Not Acceptable)
8751 West Broward Blvd.

83

84 City
Plantation, FL

85 Zip Code
33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Beth A. Pope* Beth A. Pope, Assistant Secretary 4/19/96

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
VD	LOCKE, JOSEPH	8501 W. HIGGINS ROAD	CHICAGO IL	
PD	BICKLER, JAMES A.	8501 W HIGGINS RD	CHICAGO IL	
VT	SULESKI, JAMES	3600 ROUTE 66	NEPTUNE NJ	
VS	JERAK, JOSEPHINE P.	8501 W HIGGINS RD	CHICAGO, IL 00000	
VCEO	SIMPSON, WILLIAM A.	8501 W HIGGINS RD	CHICAGO, IL 00000	
V	GRANGER, PAUL F.	3600 ROUTE 66	NEPTUNE NJ	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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Chicago, IL 60631

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Neptune, NJ 07754-1580

Chicago, IL 60631

Director

Neptune, NJ 07754-1580

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James Suleski* James Suleski

3/15/96

(908) 922-7475

Date

Daytime Phone #

CR2E034 (12/95)