2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#812265

Entity Name: ALLSTATE LIFE INSURANCE COMPANY

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	DERS ROAD OOK, IL 60062	7154				
Current Mailing Address:			New Mailing Address:			
3075 SANDERS ROAD SUITE H1A NORTHBROOK, IL 600627154						
FEI Number: 36-2554642 FEI Number Applied For () FEI Number			nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 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:						
		Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PR ()[HOHMANN, JAMI 3100 SANDERS NORTHBROOK,	RD., J5D	Title: Name: Address: City-St-Zip:	RUEBENSON 2775 SANDE	(X) Change ()Addition N, GEORGE E RS ROAD, F9 DK, IL 60062	
Title: Name: Address: City-St-Zip:	SEC () DVELOTTA, MICHA 3100 SANDERS NORTHBROOK,	RD, J5B	Title: Name: Address: City-St-Zip:	LEES, SUSA 3100 SANDE		
Title: Name: Address: City-St-Zip:	GVP () [PILCH, SAMUEL 3075 SANDERS NORTHBROOK,	ROAD, H1A	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	DR () [SIMONSON, ERI 3075 SANDERS NORTHBROOK,	C A ROAD, H1A	Title: Name: Address: City-St-Zip:	BIRD, DAVID	(X) Change()Addition) A CAN HERITAGE LIFE DRIVE LLE, FL 32224	
Title: Name: Address: City-St-Zip:	DR () I JOHN, PINTOZZI 3100 SANDERS NORTHBROOK,	ROAD	Title: Name: Address: City-St-Zip:	PINTOZZI, JO 3100 SANDE		
Title: Name: Address: City-St-Zip:	DR () I SLAWIN, KEVIN 3100 SANDERS NORTHBROOK,	ROAD, N5B	Title: Name: Address: City-St-Zip:	LOUNDS, JO 3100 SANDE	(X) Change ()Addition HN C RS ROAD, M2A DK, IL 60062	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: HEATHER DURCHOLZ ACCT 04/14/2009