


2007 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # 814785		
1. Entity Name COTTON STATES LIFE INSURANCE COMPANY		

FILED

07 MAR 27 PM 2:58

CLERK OF STATE
TALLAHASSEE, FLORIDA



01/25/07 90040 016 \$150.00
02222007 Chg-P CR2E034 (12/06)

Principal Place of Business 244 PERIMETER CENTER PARKWAY, N.E. P.O. BOX 105303 ATLANTA, GA 30348	Mailing Address 244 PERIMETER CENTER PARKWAY, N.E. P.O. BOX 105303 ATLANTA, GA 30348
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 58-0830929	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CHIEF FINANCIAL OFFICER 1200 S PINE ISLAND RD PLANTATION, FL 33324		Name Street Address (P.O. Box Number is Not Acceptable) 200 E Taines St City Tallahassee FL Zip Code 32399	

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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAURER, BARBARA 244 PERIMETER CENTER PARKWAY, N.E. ATLANTA, GA 30346 <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	VD MAGER, DAVID A 244 PERIMETER CENTER PARKWAY, N.E. ATLANTA, GA 30346 <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	SD HARMON, PAUL M 244 PERIMETER CENTER PARKWAY, N.E. ATLANTA, GA 30346 <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 CHAMBLEE, WENDY M 1222 POTIONAC RD ATLANTA, GA 30338 <input checked="" 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 BARLOW, WILLIAM J 244 PERIMETER CENTER PARKWAY, N.E. ATLANTA, GA 30346 <input checked="" 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	CD BLACKBURN, JOHN D 1701 TOWANDA AVE BLOOMINGTON, IL 61702 <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: 	Peter J Borowski, VP	3-20-07	(309) 821-3596
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

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**COTTON STATES LIFE INSURANCE COMPANY
FLORIDA ANNUAL REPORT
LIST OF ADDITIONAL OFFICERS**

<u>Name & Mailing Address</u>	<u>Office</u>
John D. Blackburn 1701 Towanda Avenue Bloomington, IL 61701	Chairman of the Board & Director
Barbara A. Baurer 1701 Towanda Avenue Bloomington, IL 61701	President, Vice Chairman & Director
David A. Magers 1701 Towanda Avenue Bloomington, IL 61701	Senior Vice President, Chief Financial Officer, & Director
Doyle J. Williams 1701 Towanda Avenue Bloomington, IL 61701	Senior Vice President, Chief Marketing Officer, & Director
Wade V. Harrison 1701 Towanda Avenue Bloomington, IL 61701	Senior Vice President Life/Health Operations
Deanna L. Frautschi 1701 Towanda Avenue Bloomington, IL 61701	Senior Vice President
W. Michael Cook 244 Perimeter Center Parkway NE Atlanta, GA 30346	Senior Vice President & Chief Operating Officer
Paul M. Harmon 1701 Towanda Avenue Bloomington, IL 61701	General Counsel, Secretary Chief Legal Officer, & Director
Robert W. Rush, Jr. 1705 Towanda Avenue Bloomington, IL 61701	Senior Vice President
Alan T. Reiss 1711 GE Road Bloomington, IL 61704	Senior Vice President, Service Operations
Steven R. Denault 1701 Towanda Avenue Bloomington, IL 61701	Vice President Human Resources
Peter J. Borowski 1705 Towanda Avenue Bloomington, IL 61701	Vice President & Controller
W. Michael Cook 244 Perimeter Center Parkway NE Atlanta, GA 30346	Vice President Agency

**COTTON STATES LIFE INSURANCE COMPANY
FLORIDA ANNUAL REPORT-
LIST OF ADDITIONAL OFFICERS**

<u>Name & Mailing Address</u>	<u>Office</u>
Cherilyn S. Hardman-Sytar 1701 Towanda Avenue Bloomington, IL 61701	Vice President Marketing
R. Dale Hall 1701 Towanda Avenue Bloomington, IL 61701	Vice President & Chief Life/Health Actuary, Appointed Actuary & Illustration Actuary
Kurt F. Bock 1701 Towanda Avenue Bloomington, IL 61701	Treasurer
Kathy Smith Whitman 1701 Towanda Avenue Bloomington, IL 61701	Assistant Secretary
Virginia M. Smith 1701 Towanda Avenue Bloomington, IL 61701	Assistant Secretary
Bruce D. Finks 1705 Towanda Avenue Bloomington, IL 61701	Assistant Treasurer
Daniel C. Eidsmoe 1711 GE Road Bloomington, IL 61704	USA PATRIOT Act Compliance Officer & Privacy Officer
Gaylord O. Coan 5150 Peachtree Industrial Blvd #400 Norcross, GA 30071	Director
Thomas A. Harris 2660 E Chase Lane Montgomery, AL 36117	Director
Robert C. McMahan One Brookhaven Drive # 202 Atlanta, GA 30319	Director
Darrell D. Pittard 4280 W Club Lane Atlanta, GA 30319	Director