

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90129 034 ***150.00

DOCUMENT # 815292

1. Corporation Name

GUIDANT LIFE INSURANCE COMPANY

Principal Place of Business
1111 ASHWORTH ROAD
WEST DES MOINES IA 50265

Mailing Address
1111 ASHWORTH ROAD
WEST DES MOINES IA 50265

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/22/1961

4. FEI Number

84-0471527

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
THE CAPITOL BLDG.
TALLAHASSEE FL 32304

81 Name THOMAS KETRING

82 Street Address (P.O. Box Number is Not Acceptable)

83 1012 PINEHURST COURT

84 City OVIEDO FL 85 Zip Code 32765

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

Thomas Ketring

Thomas Ketring

4-23-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DV ☐ DELETE
NAME BAXTER, BRIAN L
STREET ADDRESS 710 WESTBRANCH DRIVE
CITY-ST-ZIP WAUKEE IA 52063

1.1 TITLE VDT ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1111 ASHWORTH ROAD
1.4 CITY-ST-ZIP WEST DES MOINES, IA 50265

TITLE ~~SVPD~~ ☐ DELETE
NAME GATES, WILLIAM
STREET ADDRESS 3505 ASHWOOD DRIVE
CITY-ST-ZIP URBANDALE IA 50265

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1111 ASHWORTH ROAD
2.4 CITY-ST-ZIP WEST DES MOINES IA 50265

TITLE PCF ☐ DELETE
NAME HANSEN, DARRYL D.
STREET ADDRESS 2065 S. 4TH ST.
CITY-ST-ZIP WEST DES MOINES IA

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 1111 ASHWORTH ROAD
3.4 CITY-ST-ZIP WEST DES MOINES IA 50265

TITLE V ☐ DELETE
NAME HUGHES, BRIAN JOSEPH
STREET ADDRESS 5621 POMMEL PLACE
CITY-ST-ZIP WEST DES MOINES IA

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 1111 ASHWORTH ROAD
4.4 CITY-ST-ZIP WEST DES MOINES, IA 50265

TITLE VS ☐ DELETE
NAME FARR, THOMAS C.
STREET ADDRESS 608 46TH STREET
CITY-ST-ZIP DES MOINES IA 50312

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS 1111 ASHWORTH ROAD
5.4 CITY-ST-ZIP WEST DES MOINES IA 50265

TITLE D ☒ DELETE
NAME BALLEW, GLENN L.
STREET ADDRESS 3132 JORDAN GROVE
CITY-ST-ZIP WEST DES MOINES IA

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS SEE ATTACHED
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

Douglas V. Shelton

DOUGLAS V. SHELTON

4/22/99

515-267-5754

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0549204

815292
532266-90/29-34.

GUIDANT LIFE INSURANCE COMPANY
1111 ASHWORTH ROAD
WEST DES MOINES, IA 50265

Board Members

Darryl D. Hansen	C
Douglas K. Howell	D
Janice K. Beckstrom	D
Brian L. Baxter	D
Jeffrey D. Eaton	D

Officers

Darryl D. Hansen	P
Douglas K. Howell	VT
Robert A. Crane	V
Thomas C. Farr	VS
Janice K. Beckstrom	P
Jeffrey D. Eaton	P
Larry D. Morris	V
Brian L. Baxter	V
John C. Roberts	V

William S. Gates	V
Lynsey L. Oster	V
Brian J. Hughes	V
Donald E. Page	V
James W. Keim	V
K. Wayne Cobb	V

Robert D. Conroy	V
Ann J. Michelson	V

Lawrence Dykstra	Actuary
Annette M. Roth	Assistant Treasurer
Douglas V. Shelton	Assistant Treasurer
Susan K. Bunz	Assistant Secretary
Carla S. Meiners	Assistant Secretary