2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006
Secretary of State

DOCUMENT# 818133

Entity Name: INVESTORS GUARANTY LIFE INSURANCE COMPANY

Current Principal Place of Business:

818 WEST SEVENTH ST.
ATTN: CT CORPORATION
LOS ANGELES, CA 90017

New Principal Place of Business:

Current Mailing Address:

48 MONROE TURNPIKE
ATTN: OXFORD HEALTH PLANS GEN. COUNSEL
TRUMBULL, CT 06611

New Mailing Address:

FEI Number: 91-6034263 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PCD	( ) Delete
Name:	BERG, CHARLES G	
Address:	48 MONROE TURNPIKE	
City-St-Zip:	TRUMBULL, CT 06611	
Title:	EVP	( ) Delete
Name:	MUNEY, ALAN M.D.	
Address:	48 MONROE TURNPIKE	
City-St-Zip:	TRUMBULL, CT 06611	
Title:	DT	( ) Delete
Name:	THOMPSON, KURT B	
Address:	48 MONROE TURNPIKE	
City-St-Zip:	TRUMBULL, CT 06611	
Title:	AS	( ) Delete
Name:	COLICA, CARMEL	
Address:	48 MONROE TURNPIKE	
City-St-Zip:	TRUMBULL, CT 06611	
Title:	S/D	( ) Delete
Name:	MCDONNELL, MICHAEL	
Address:	5901 LINCOLN DRIVE	
City-St-Zip:	EDINA, FL 55436	
Title:	T	( ) Delete
Name:	OBERNENDEK, ROBERT W	
Address:	9900 BREN ROAD EAST	
City-St-Zip:	MINNETONKA, MN 55343	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PCD	(X) Change ( ) Addition
Name:	HILL, KEVIN R	
Address:	48 MONROE TURNPIKE	
City-St-Zip:	TRUMBULL, CT 06611	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	AT/D	(X) Change ( ) Addition
Name:	ANDERSON, CRAIG	
Address:	48 MONROE TURNPIKE	
City-St-Zip:	TRUMBULL, CT 06611	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S/D	(X) Change ( ) Addition
Name:	RICH, JONATHAN P	
Address:	5901 LINCOLN DRIVE	
City-St-Zip:	EDINA, FL 55436	
Title:	T	(X) Change ( ) Addition
Name:	OBERRENDER, ROBERT W	
Address:	9900 BREN ROAD EAST	
City-St-Zip:	MINNETONKA, MN 55343	

I hereby certify that the information supplied with this filing does not qualify for the 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: CARMEL COLICA AS 01/23/2006

Electronic Signature of Signing Officer or Director — Date