

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 818162 (0)

1. Corporation Name

UNITED FARM BUREAU FAMILY LIFE INSURANCE COMPANY



Principal Place of Business

ATTN: JOHN C. HAND
P O BOX 1250
INDIANAPOLIS INDIANA 46206

Mailing Address

ATTN: JOHN C. HAND
P O BOX 1250
INDIANAPOLIS INDIANA 46206

3. Date Incorporated or Qualified
09/08/1964

3a. Date of Last Report
02/10/1995

2. Principal Place of Business

2a. Mailing Address

21 Attn: Lynn B. Jongleux
Suite, Apt. #, etc.

26 Attn: Lynn B. Jongleux
Suite, Apt. #, etc.

22 P O Box 1250

27 P O Box 1250

City & State

23 Indianapolis IN

City & State

28 Indianapolis IN

Zip Country

24 46206 25 Marion

Zip Country

29 46206 30 Marion

9. Name and Address of Current Registered Agent

4. FEI Number
35-1097117

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

10. Name and Address of New Registered Agent

ELLISON, ROBERT W
21 SW 40TH AVE
FORT LAUDERDALE FL

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent's signature required when changing agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE VCS
NAME HAND, JOHN
STREET ADDRESS 7802 BAYSHORE DR
CITY-ST-ZIP INDIANAPOLIS, IN 00000 ☒ DELETE

TITLE EV
NAME TURBEVILLE, CLYDE
STREET ADDRESS 9472 TAMARACK DR
CITY-ST-ZIP INDIANAPOLIS IN ☒ DELETE

TITLE V
NAME MARTIN, JOSEPH A
STREET ADDRESS 215 HILLVIEW DR
CITY-ST-ZIP MARTINSVILLE IN ☐ DELETE

TITLE V
NAME DUGAN, JOSEPH M.
STREET ADDRESS 604 JESSUP ROAD
CITY-ST-ZIP PLAINFIELD IN ☐ DELETE

TITLE V
NAME CAMPBELL, WILLIAM A.
STREET ADDRESS 21578 DUNBAR ROAD
CITY-ST-ZIP SHERIDAN IN ☐ DELETE

TITLE VAS
NAME POEHLER, PATRICIA A
STREET ADDRESS 624 E. CHARIOT LANE
CITY-ST-ZIP INDIANAPOLIS IN ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE GCS
1.2 NAME Jongleux, Lynn B.
1.3 STREET ADDRESS 7792 Holliday Dr East
1.4 CITY-ST-ZIP Indianapolis IN ☒ Change ☐ Addition

2.1 TITLE EV
2.2 NAME Henderson, Donald E
2.3 STREET ADDRESS 211 West Street
2.4 CITY-ST-ZIP Pendleton IN ☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

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

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)(c), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 15, 1996

317/692-7503

CR2E034 (12/95)

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UNITED FARM BUREAU FAMILY LIFE INSURANCE COMPANY
225 SOUTH EAST STREET
INDIANAPOLIS, IN 46202

<u>Title</u>	<u>Officers and Directors</u>	<u>Street Address</u>	<u>City and State</u>
P/D	Pearson, Harry L.	5901 North 200 West	Hartford City, IN
V/D	Arburn, Jerry W.	Rural Route 2, Box 86	Princeton, IN
EVP	Donald E. Henderson	211 West Street	Pendleton, IN
GC/S	Lynn Brundage Jongleux	7792 Holliday Drive East	Indianapolis, IN
V	Shepherd, Carl	10748 Royal Drive	Carmel, IN
V	Campbell, William A.	5250 Hawthorne Drive	Indianapolis, IN
V	Dugan, Joseph M.	28 Raccoon Court	Brownsburg, IN
V	Martin, Joseph A.	215 Hillview Drive	Martinsville, IN
V/A/S	Poehler, Patty	624 East Chariot Lane	Indianapolis, IN
V	Rink, James P.	819 Balroyal Court	Indianapolis IN
V	Freeman, Jeffrey N.	1624 Valley Brook Drive	Indianapolis, IN
D	Hegel, Carolyn	3330 North 650 East	Andrews, IN
D	Bode, Wayne E.	1750 West 300 South	Kewanna, IN
D	Yoder, Mike	13519 CR 20	Milford, IN
D	Funk, Merlin D.	6944 North CR 700 West	Royal Center, IN
D	Boys, Larry V.	Route 7, Box 96	Peru, IN
D	Sharma, Rita L.	2024 West 125 South	Williamsport, IN
D	Likens, Herbert G.	7609 West 300 North	Anderson, IN
D	Badger, Lowell	10447 West CR 350 North	Merom, IN
D	Ketner, Paul A.	16500 East 400 North	Hope, IN
D	Randall C. W. Kron	17425 Owensville Road	Evansville, IN
D	Borcherding, Arvel J.	8640 North CR 100 East	Seymour, IN