

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 818162

FILED
Apr 01, 2009
Secretary of State

Entity Name: UNITED FARM FAMILY LIFE INSURANCE COMPANY

Current Principal Place of Business:

JONGLEUX, LYNN
POB 1250
INDIANAPOLIS, IN 46206 US

Current Mailing Address:

JONGLEUX, LYNN
POB 1250
INDIANAPOLIS, IN 46206 US

New Principal Place of Business:

JONGLEUX, LYNN
225 S EAST STREET
INDIANAPOLIS, IN 46202 US

New Mailing Address:

JONGLEUX, LYNN
225 S EAST STREET
INDIANAPOLIS, IN 46202 US

FEI Number: 35-1097117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLISON, ROBERT W
21 SW 40TH AVE
FORT LAUDERDALE, FL 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: GCS () Delete
Name: JONGLEUX, LYNN B.
Address: 7792 HOLLIDAY DRIVE EAST
City-St-Zip: INDIANAPOLIS, IN 46260

Title: D () Delete
Name: BACON, MARK E
Address: 3175 W 1050 S
City-St-Zip: MILROY, IN 46156

Title: D () Delete
Name: SCHICKEL, ROBERT L
Address: 6950 CORYDON RIDGE RD NE
City-St-Zip: LANESVILLE, IN 47136

Title: V () Delete
Name: POEHLER, PATRICIA A
Address: 624 E CHARIOT LN
City-St-Zip: INDIANAPOLIS, IN 46227

Title: D () Delete
Name: BROWN, DALE E
Address: RT 1 BOX 71A
City-St-Zip: SHOALS, IN 47581

Title: D () Delete
Name: CULP, KENDELL
Address: 3598 S 150TH W
City-St-Zip: RENSSELAER, IN 47978

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: GCS (X) Change () Addition
Name: JONGLEUX, LYNN B.
Address: 7792 HOLLIDAY DRIVE EAST
City-St-Zip: INDIANAPOLIS, IN 46260 49

Title: D (X) Change () Addition
Name: BACON, MARK E
Address: 3175 W 1050 S
City-St-Zip: MILROY, IN 46156 70

Title: D (X) Change () Addition
Name: SCHICKEL, ROBERT L
Address: 6950 CORYDON RIDGE RD NE
City-St-Zip: LANESVILLE, IN 47136 31

Title: V (X) Change () Addition
Name: POEHLER, PATRICIA A
Address: 624 E CHARIOT LN
City-St-Zip: INDIANAPOLIS, IN 46227 49

Title: D (X) Change () Addition
Name: GORMONG, JEFFREY A
Address: 440 W STATE ROAD 246
City-St-Zip: FARMERSBURG, IN 478509447 84

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LYNN B. JONGLEUX

SEC

04/01/2009

Electronic Signature of Signing Officer or Director

Date