2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#820053

Mar 31, 2011 Secretary of State

Entity Name: FIRST INVESTORS LIFE INSURANCE COMPANY

Current Principal Place of Business: New Principal Place of Business:

110 WALL STREET NEW YORK, NY 10005

Current Mailing Address: New Mailing Address:

RARITAN PLAZA 1 P O BOX 7836 EDISON, NJ 08818

FEI Number: 13-1968606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KATZ, BRUCE 3450 LAKESIDE DR STE 340 MIRAMAR, FL 330273234 US

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

OFFICERS AND DIRECTORS:

Title: D.P

Name: SPRINGSTEEN, CAROL E Address: RARITAN PLAZA 1 PO BOX 7836

City-St-Zip: EDISON, NJ 08818 US

Title: D,C

Name: PINKERTON, CHRISTOPHER Address: 110 WALL STREET City-St-Zip: NEW YORK, NY 10005 US

Title: D,V

Name: DRINKWATER, WILLIAM H

Address: 110 WALL ST

City-St-Zip: NEW YORK, NY 10005 US

Title:

Name: LIPKUS, WILLIAM M

Address: RARITAN PLAZA 1 PO BOX 7836

City-St-Zip: EDISON, NJ 08818 US

Title: \

Name: FALCON, LAWRENCE M Address: RARITAN PLAZA 1 PO BOX 7836

City-St-Zip: EDISON, NJ 08818 US

Title: V

Name: MUELLER, GLEN D

Address: RARITAN PLAZA 1 PO BOX 7836

City-St-Zip: EDISON, NJ 08818

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM LIPKUS CFO 03/31/2011