

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 825413

FILED
May 01, 2012
Secretary of State

Entity Name: EQUITRUST LIFE INSURANCE COMPANY

Current Principal Place of Business:

5400 UNIVERSITY AVE.
WEST DES MOINES, IA 502665997 US

New Principal Place of Business:

7100 WESTOWN PKWY
SUITE 200
WEST DES MOINES, IA 50266 US

Current Mailing Address:

ATTN: DAVID A. MCNEILL
5400 UNIVERSITY AVE
WEST DES MOINES, IA 502665997 US

New Mailing Address:

7100 WESTOWN PKWY
SUITE 200
WEST DES MOINES, IA 50266 US

FEI Number: 42-1468417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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

OFFICERS AND DIRECTORS:

Title: P&D
Name: LANGE, JEFFREY S
Address: 8425 WOODFIELD CROSSING BLVD., SUITE 305E
City-St-Zip: INDIANAPOLIS, IN 46240 US

Title: S
Name: TOWRISS, DANIEL J
Address: 8425 WOODFIELD CROSSING BLVD., SUITE 305E
City-St-Zip: INDIANAPOLIS, IN 46240 US

Title: T
Name: PURVIS, JAMES D
Address: 8425 WOODFIELD CROSSING BLVD., SUITE 305E
City-St-Zip: INDIANAPOLIS, IN 46240 US

Title: D
Name: MINERD, BRYON S
Address: 100 WILSHIRE BOULEVARD, SUITE 2000
City-St-Zip: SANTA MONICA, CA 90401 US

Title: D
Name: KORMAN, DAVID L
Address: 227 WEST MONROE, SUITE 4800
City-St-Zip: CHICAGO, IL 60606 US

Title: D
Name: WALTER, MARK R
Address: 227 WEST MONROE, SUITE 4800
City-St-Zip: CHICAGO, IL 60606 US

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: DANIEL J. TOWRISS

SEC

05/01/2012

Electronic Signature of Signing Officer or Director

Date