

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90105 008 ***150.00

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1. Entity Name
EMC NATIONAL LIFE COMPANY



Principal Place of Business
4095 NW URBANDALE DRIVE
URBANDALE, IA 50322-7914

Mailing Address
P.O. BOX 9202
DES MOINES, IA 50306-9202



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07052005 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
42-0868851

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE N/A

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SV Delete
 NAME PEARL, RITA A
 STREET ADDRESS 4095 NW URBANDALE DRIVE
 CITY-ST-ZIP URBANDALE, IA 503227914

TITLE V/S Change Addition
 NAME Jenifer L. Mercer-Klimowski
 STREET ADDRESS 4095 NW Urbandale Drive
 CITY-ST-ZIP Urbandale, IA 50322-7914

TITLE CD Delete
 NAME KELLEY, BRUCE G
 STREET ADDRESS 4095 NW URBANDALE DRIVE
 CITY-ST-ZIP URBANDALE, IA 503227914

TITLE D Change Addition
 NAME Robert Murray
 STREET ADDRESS 4095 NW Urbandale Drive
 CITY-ST-ZIP Urbandale, IA 50322-7914

TITLE PD Delete
 NAME HUISINGA, ALAN D.
 STREET ADDRESS 4095 NW URBANDALE DRIVE
 CITY-ST-ZIP URBANDALE, IA 503227914

TITLE D Change Addition
 NAME Lawrence Hedlin
 STREET ADDRESS 4095 NW Urbandale Drive
 CITY-ST-ZIP Urbandale, IA 50322-7914

TITLE VT Delete
 NAME TROESTER, KEITH R
 STREET ADDRESS 4095 NW URBANDALE DRIVE
 CITY-ST-ZIP URBANDALE, IA 50322

TITLE D Change Addition
 NAME Fredrick Schiek
 STREET ADDRESS 4095 NW Urbandale Drive
 CITY-ST-ZIP Urbandale, IA 50322-7914

TITLE D Delete
 NAME TEGLER, GRETCHEN H
 STREET ADDRESS 4095 NW URBANDALE DRIVE
 CITY-ST-ZIP URBANDALE, IA 50322

TITLE D Change Addition
 NAME Richard Johnson
 STREET ADDRESS 4095 NW Urbandale Drive
 CITY-ST-ZIP Urbandale, IA 50322-7914

TITLE D Delete
 NAME LOCK, FREDERICK H
 STREET ADDRESS 4095 NW URBANDALE DRIVE
 CITY-ST-ZIP URBANDALE, IA 50322

TITLE D Change Addition
 NAME Robert Howe
 STREET ADDRESS 4095 NW Urbandale Drive
 CITY-ST-ZIP Urbandale, IA 50322-7914

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jenifer L. Mercer-Klimowski 7/21/05 515-645 4052
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #