

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 835833

FILED
Mar 09, 2006
Secretary of State

Entity Name: GREAT-WEST LIFE & ANNUITY INSURANCE COMPANY

Current Principal Place of Business:

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111 US

New Principal Place of Business:

Current Mailing Address:

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111 US

New Mailing Address:

FEI Number: 84-0467907

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCALLUM, WILLIAM TH, OMAS
Address: 8515 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: VT () Delete
Name: DERBACK, GLEN RAY
Address: 8515 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: S () Delete
Name: LENNOX, D CRAIG
Address: 8515 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: VP () Delete
Name: SCHULTZ, RICHARD G VP
Address: 8525 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

Title: D () Delete
Name: DESMARAIS, ANDRE ROGER
Address: 751 VICTORIA SQUARE
City-St-Zip: MONTREAL, QU H2YSJ CA

Title: D () Delete
Name: BALOG, JAMES
Address: 2205 N SOUTHWINDS BLVD. APT. 307
City-St-Zip: VERO BEACH, FL 32963 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCFEETORS, RAY L
Address: 8515 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

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

Title: S (X) Change () Addition
Name: LENNOX, CRAIG SR VP
Address: 8515 E ORCHARD RD
City-St-Zip: GREENWOOD VILLAGE, CO 80111 US

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD G. SCHULTZ

VP

03/09/2006

Electronic Signature of Signing Officer or Director

Date