

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837337

FILED
Apr 24, 2012
Secretary of State

Entity Name: PERICO LIFE INSURANCE COMPANY

Current Principal Place of Business:

13358 MANCHESTER ROAD
ST. LOUIS, MO 63131 US

New Principal Place of Business:

13358 MANCHESTER ROAD
STE 255
ST. LOUIS, MO 63131 US

Current Mailing Address:

C/O HCC SERVICE CO. - D. GREEN
13403 NORTHWEST FRWY
HOUSTON, TX 77040 US

New Mailing Address:

FEI Number: 51-0137488 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: DV
Name: WILLIAMS, CHRISTOPHER J
Address: 13403 NORTHWEST FRWY
City-St-Zip: HOUSTON, TX 77040

Title: D
Name: PETTY, JEFFREY
Address: 13358 MANCHESTER RD, STE 255
City-St-Zip: ST. LOUIS, MO 63131

Title: VT
Name: LEE, JONATHAN
Address: 13403 NORTHWEST FRWY
City-St-Zip: HOUSTON, TX 77040

Title: VS
Name: RINICELLA, RANDY D
Address: 13403 NORTHWEST FRWY
City-St-Zip: HOUSTON, TX 77040

Title: DP
Name: KELBEL, CRAIG J
Address: 225 TOWNPARK DR, STE 200
City-St-Zip: KENNESAW, GA 301445509

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: RANDY D. RINICELLA

VS

04/24/2012

Electronic Signature of Signing Officer or Director

Date