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1 of 2

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 837449 (8)

1. Corporation Name

CHEROKEE NATIONAL LIFE INSURANCE COMPANY



Principal Place of Business

2960 RIVERSIDE DR
BOX 6097
MACON GA 31213-8399

Mailing Address

2960 RIVERSIDE DR
BOX 6097
MACON GA 31213-8399

3. Date Incorporated or Qualified
11/30/1976

3a. Date of Last Report
03/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STATE INSURANCE COMMISSIONER
CAPITOL BUILDING
TALLAHASSEE FL 32304

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when new state agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	PD MILLER, DON K.	RT 4, BOX 302 GRAHAM RD	GRAY GA	<input type="checkbox"/>
	D JONES, CHARLES, M	1112 GLENVIEW DR	ALBANY GA	<input type="checkbox"/>
	D NUSSBAUM, WALTON, K, JR	110 WASHINGTON AVE	SAVANNAH GA	<input type="checkbox"/>
	ST BROWN, BILLY W.	170 WEST RIDGE CIRCLE	MACON GA	<input type="checkbox"/>
	D WINGATE, J, ALTON	400 N MAIN ST	CORNELIA GA	<input type="checkbox"/>
	D SMITH, ALEX P. JR.	120 WEST OAK ST.	MCRAE GA	<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
	PD MILLER, DON K.	445 PIERCE AVENUE	MACON, GA 31204	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

STEVE J. SMITH, EXEC. VP & CFO

4/10/96

912-477-0400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)

CHEROKEE NATIONAL LIFE INSURANCE COMPANY

Names and Addresses of Officers and Directors (continued)

Title	Names of Officers and Directors	Street Address	City/State
V.P.	Kelly, E. Doyle	216 Creek Chase	Macon, Ga
V.P.	Line, David E.	251 CHADWICK CIR.	Macon, Ga.
XEC.V.P.	Smith, Steve J.	117 WATERFORD PLACE	Macon, Ga
D	Hall, George Henderson	4161 Arkwright Rd.	Macon, Ga
D	Copeland, Roy Dallis	133 Honeysuckle Lane	Barnesville, Ga
D	Murphy, Morgan Grier	1616 N. Valencia	Albany, Ga.
D	Laffitte, Ralph Montague	379 Baker Blvd.	Estill, S.C.