

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 839476 (9)
1. Corporation Name
AMERICAN LIFE AND CASUALTY INSURANCE COMPANY



Principal Place of Business 405 E AVE. DES MOINES BLDG PO BOX 8167 DES MOINES IA 50306-6167	Mailing Address 11815 N PENNSYLVANIA STREET PO BOX 8167 CARMEL IN 46032 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 222 Merchandise Mart Plaza Suite, Apt. #, etc. 22 City & State 23 Chicago, IL Zip 24 60654		2a. Mailing Address 26 11825 N. Pennsylvania St. Suite, Apt. #, etc. 27 Dept. A2A City & State 28 Carmel, IN Zip 29 46032		3. Date Incorporated or Qualified 11/07/1977	
Country 25 US		Country 30 US		4. FEI Number 45-0103436 Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
STATE OF FLORIDA
THE CAPITOL BUILDING
TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	COBO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HILBERT, STEPHEN C	1.2 NAME	
STREET ADDRESS	11815 N PENNSYLVANIA STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	CARMEL IN	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONGAWARE, DONALD F	2.2 NAME	PD
STREET ADDRESS	11815 N PENNSYLVANIA STREET	2.3 STREET ADDRESS	Kilian, Thomas J.
CITY-ST-ZIP	CARMEL IN	2.4 CITY-ST-ZIP	
TITLE	EVPS	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	INLOW, LAWRENCE W	3.2 NAME	EVPD
STREET ADDRESS	11815 N PENNSYLVANIA STREET	3.3 STREET ADDRESS	Dick, Rollin M.
CITY-ST-ZIP	CARMEL IN	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	INLOW, LAWRENCE W	4.2 NAME	EVPSD
STREET ADDRESS	11815 N PENNSYLVANIA STREET	4.3 STREET ADDRESS	Sabl, John J.
CITY-ST-ZIP	CARMEL IN	4.4 CITY-ST-ZIP	
TITLE	SVPT	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADAMS, JAMES S	5.2 NAME	
STREET ADDRESS	11815 N PENNSYLVANIA STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	CARMEL IN	5.4 CITY-ST-ZIP	
TITLE	SVPA	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUHL, RONALD F	6.2 NAME	SVPAS
STREET ADDRESS	11815 N PENNSYLVANIA STREET	6.3 STREET ADDRESS	Colliflower, Michael A.
CITY-ST-ZIP	CARMEL IN	6.4 CITY-ST-ZIP	

14. 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 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

CR2E034 (10/97)

OFFICERS AND DIRECTORS

<u>Name</u>	<u>Office</u>
Stephen C. Hilbert	Chairman of the Board , Director
Thomas J. Kilian	President , Director
Rollin M. Dick	Executive Vice President and Chief Financial Officer, Director
John J. Sabl	Executive Vice President, General Counsel and Secretary, Director
James S. Adams	Senior Vice President and Treasurer
David J. Barra	Senior Vice President, Finance
Robert E. Burkett, Jr.	Senior Vice President, Legal and Assistant Secretary
Michael A. Colliflower	Senior Vice President, Legal, Chief Compliance Officer and Assistant Secretary
Jon F. Davis	Senior Vice President, Actuarial
William T. Devanney, Jr.	Senior Vice President, Corporate Taxes
James S. Hawke	Senior Vice President, Actuarial
Ronald F. Ruhl	Senior Vice President, Chief Actuary
Mark Shaw	Senior Vice President, Actuarial
K. Lowell Short, Jr.	Senior Vice President, Controller
James M. Crafton	Vice President, Financial Reporting
James C. Crampton	Vice President, Corporate Taxes
Marcus A. Dallas	Vice President, Investment Accounting
Louis S. Kanowsky	Vice President, Statutory Reporting
Daniel M. Kiefer	Vice President, Accounting
Christopher J. Krisch	Vice President, Marketing
Joseph L. Maverick	Vice President, Investment Officer
David A. White	Vice President, Marketing
Steven E. Willeke	Vice President, Financial Reporting
Beth A. Eischeid	Second Vice President, Legal
David D. Humm	Second Vice President, Corporate Taxes
Jill A. Kirk	Second Vice President, Actuarial
Ty V. Nguyen	Second Vice President, Accounting
Ngaire E. Cuneo	Director
Robert G. Clancy	Director
Laurence Good	Director
Susan C. Morisato	Director

The address for Robert E. Burkett, Jr. is 11825 N. Pennsylvania St.,
Carmel, IN 46032.