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May 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 841531 (7)
 1. Corporation Name
HORACE MANN INVESTORS, INC.



Principal Place of Business 1 HORACE MANN PLAZA ATTN: TAX DEPT. SPRINGFIELD IL 62715	Mailing Address 1 HORACE MANN PLAZA ATTN: TAX DEPT. SPRINGFIELD IL 62715
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/28/1978		4. FEI Number 37-0792966		Applied For <input type="checkbox"/> Not Applicable
2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
23 Zip	25 Country	28 Zip	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
24	25	29	30	

9. Name and Address of Current Registered Agent COMPTROLLER OF THE STATE DIVISION OF SECURITIES --1402 CAPITOL BLDG TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	85 Zip Code
				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDC ARISMAN, A THOMAS 1 HORACE MANN PLAZA SPRINGFIELD, IL 0 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition SEE ATTACHED LIST
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KELLY, WILLIAM 1 HORACE MANN PLAZA SPRINGFIELD, IL 0 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECKER, LARRY K #1 HORANCE MANN PLAZA SPRINGFIELD IL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M WILSON, RICHARD D. 1 HORACE MANN PLAZA SPRINGFIELD, IL 0 <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCO BARNETT, DIANE M. 1 HORACE MANN PLAZA SPRINGFIELD IL <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CAPARROS, ANN M. 1 HORACE MANN PLAZA SPRINGFIELD IL <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Diane Barnett* (217) 788-5385

CR2E034 (10/97)

**HORACE MANN INVESTORS, INC.
FLORIDA CORPORATION ANNUAL REPORT
OFFICERS & DIRECTORS LISTING**
As of December 31, 1997

TITLE	NAME	OFFICE ADDRESS
S	SACCO, LINDA L.	#1 HORACE MANN PLAZA SPRINGFIELD, ILLINOIS 62715
C	FISHER, ROGER	#1 HORACE MANN PLAZA SPRINGFIELD, ILLINOIS 62715
D	ZOCK, GEORGE	#1 HORACE MANN PLAZA SPRINGFIELD, ILLINOIS 62715