## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # 843339** (3)**AMERICAN FOUNDATION LIFE INSURANCE COMPANY** Principal Place of Business Mailing Address 2801 HIGHWAY 280 SOUTH. (ZIP 35223) 2801 HIGHWAY 280 SOUTH. (ZIP 35223) P.O. BOX 2606 P.O. BOX 2606 BIRMINGHAM AL 35202 BIRMINGHAM AL 35202 - DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 05/25/1979 02/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 63-0761690 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent INSURANCE COMMISSIONER 81 Name THE CAPITOL BLDG 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Director **Change** \_\_\_ Addition NABERS, DRAYTON NAME 1.2 NAME **28**01 HIGHWAY 280 SOUTH STREET ADDRESS 1.3 STREET ADDRESS BIRMINGHAM AL CITY-ST-ZIP 1.4 CHTY-ST-ZIP DELETE TITLE 2.1 TITLE sul Director Addition Secrestann WRIGHT, JOHN K. NAME 2.2 NAME Deborah  $\mathbf{T}$ 2801 HIGHWAY 280 SOUTH STREET ADDRESS 2.3 STREET ADDRESS Sout 2701 High BIRMINGHAM AL Birmina CITY-ST-ZIP 2. 4 CITY-ST-ZIP 35223 ŝyd DELETE TITLE 3.1 TITLE Addition ☐ Change President and Director BENTLEY, ORMOND L. NAME 3.2 NAME WAYNE. Œ. 2801 HIGHWAY 280 SOUTH STREET ADDRESS 3.3 STREET ADDRESS 2801 High Soun **BIRMINGHAM AL** CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition Briggs, R. Stephen NAME 4. 2 NAME 2801 HIGHWAY 280 SOUTH STREET ADDRESS 4.3 STREET ADDRESS BIRMINGHAM AL CITY-ST-ZIP 4.4 CITY - ST - ZIP SVD DELETE TITLE 51 TITLE ☐ Change ■ Addition MASSENGALE, JIM E. NAME 52 NAME 2801 HIGHWAY 280 SOUTH STREET ADDRESS 5.3 STREET ADDRESS BIRMINGHAM AL CITY-ST-ZIP 5.4 CITY-ST-ZIP SVID TITLE DELETE 6.1 TITLE Change Addition WILLIAMS, A.S. III NAME 6.2 NAME 2801 HWY 280 S STREET ADDRESS 6.3 STREET ADDRESS BIRMINGHAM AL

14. I do 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.

CICMATHDE.

CITY-ST-ZIP

William 1 Dens

8/5/92

(205)829-9230

**FILED** 

Aug 12 1997 8:00am

Secretary of State