2008 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # 847442 --

1. Entity Name

GLOBE LIFE & ACCIDENT INSURANCE COMPANY



FILED
Jan 14, 2008 08:00 AM
Secretary of State

Principal Place of Business

GLOBE LIFE CENTER 204 N ROBINSON

OKLAHOMA CITY, OK 73102 US

Mailing Address

3700 S STONEBRIDGE DRIVE MC KINNEY, TX 75070



01072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 63-0782739 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000

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	named entity submits this statement for the plans of registered agent.	surpose of changing its registered	d office or re	egistered agent, or bo	th, in the	State of Florida	a. I am famil	liar with, and ac	cept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered				od Agont signature required when reinstating) _ DATE				-	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	01/1	00000782 5/08-800	 2323 070-005	5 150.00	
10.	OFFICERS AND DIRECT	CTORS		17.3	3 30	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 1 1		
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NAME	MITCHELL, ROBERT B		公共 为			The state of the state			
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NAME	HUTCHINSON, LARRY M	1					· ` ` , · · · ·		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OKLAHOMA CITY, OK 73102

1/7/08

Daytime Phone #