2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2011
Secretary of State

DOCUMENT# F07000001896

Entity Name: ADMIRAL LIFE INSURANCE COMPANY OF AMERICA

Current Principal Place of Business:

ONE STATE MUTUAL DR
ROME, GA 30165

New Principal Place of Business:

210 EAST SECOND AVENUE
SUITE 301
ROME, GA 30161

Current Mailing Address:

PO BOX 33
ROME, GA 301620033

New Mailing Address:

FEI Number: 41-6041001 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANTHONY, JOHN
8545 126TH AVE N SUITE 200
SAINT PETERSBURG, FL 337331502 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: YANCEY, DELOS H III
Address: 185 BELLEMONT DRIVE S.W.
City-St-Zip: ROME, GA 30165

Title: D
Name: HUBBARD, CLINTON G
Address: P.O. BOX 1248
City-St-Zip: DALTON, GA 30722

Title: D
Name: SMITH, S. DAVID JR
Address: 309 E. 2ND AVENUE
City-St-Zip: ROME, GA 30161

Title: D
Name: WATKINS, DONALD V
Address: 2170 HIGHLAND AVENUE SUITE 250
City-St-Zip: BIRMINGHAM, AL 35205

Title: V
Name: GORDON, RICK A
Address: 11125 PARK BLVD, SUITE 104
City-St-Zip: SEMINOLE, FL 33772

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RICK A. GORDON V 02/07/2011

Electronic Signature of Signing Officer or Director — Date