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FILED

Feb 13 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000002981 (8)

1. Corporation Name

INTEGON LIFE NETWORK CORPORATION

Principal Place of Business

2610 WYCLIFF RD.  
RALEIGH NC 27607

Mailing Address

2610 WYCLIFF RD.  
RALEIGH NC 27607-3063



3. Date Incorporated or Qualified

06/08/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

56-1873473

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DAT  
BESTOR, ROBERT J  
2610 WYCLIFF RD.  
RALEIGH NC 27607

DELETE

SP  
HENSON, JIM L  
2610 WYCLIFF RD.  
RALEIGH NC 27607

DELETE

SVC  
SILVERMAN, SCOTT D  
2610 WYCLIFF RD.  
RALEIGH NC 27607

DELETE

V  
KIPP, DONALD P  
2610 WYCLIFF RD.  
RALEIGH NC 27607

DELETE

AS  
BUTLER, PATRICIA B  
2610 WYCLIFF RD.  
RALEIGH NC 27607

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Dir., V.P., Assoc. Gen.  
James W. Lillie Counsel & Secy.  
2610 Wycliff Road  
Raleigh, NC 27607

Change Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Dir., Pres.  
James A. Mallon  
2610 Wycliff Road  
Raleigh, NC 27607

Change Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Sr.V.P., Gen. Counsel &  
Asst. Secy.

Change Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Sr.V.P. (Finance) & Treas.  
Mary H. McJowell  
2610 Wycliff Road  
Raleigh, NC 27607

Change Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change Addition

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.

SIGNATURE: Patricia B. Butler / Asst. Secy.

1/22/97

919-786-8186

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)