

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004320

FILED
Jan 04, 2011
Secretary of State

Entity Name: SUNSET LIFE INSURANCE COMPANY OF AMERICA

Current Principal Place of Business:

3520 BROADWAY
KANSAS CITY, MO 641112565 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 219532
KANSAS CITY, MO 641219532 US

New Mailing Address:

FEI Number: 91-0431975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: PD
Name: BIXBY, ROBERT P
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 641112565 US

Title: D
Name: BIXBY, WALTER E
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 641112565 US

Title: D
Name: MILTON, MARK A
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 641112565 US

Title: D
Name: DUFFY, CHARLES R JR.
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 641112565 US

Title: V
Name: LAIRD, DAVID A
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 641112565 US

Title: SD
Name: O'CONNOR, MATTHEW R
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 641112565 US

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: /S/ DAVID A LAIRD

_____ Electronic Signature of Signing Officer or Director

VP

01/04/2011

_____ Date