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FILED
Apr 11 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 # K39188 (3) 1. Corporation Name FIRST MIAMI LIFE INSURANCE COMPANY					
Principal Place of Business FDIC-100 COLONY SQ. BOX 68, SUITE 2200 ATLANTA GA 30361			Mailing Address FDIC-100 COLONY SQ. BOX 68, SUITE 2200 ATLANTA GA 30301-0068		
2. Principal Place of Business 21 FDIC-1201 W. Peachtree St.		2a. Mailing Address 26 FDIC-1201 W. Peachtree St.		3. Date Incorporated or Qualified 01/11/1989	
Suite Apt. # etc. 22 Suite 1800		Suite Apt. #, etc. 27 Suite 1800		3a. Date of Last Report 05/01/1996	
City & State 23 Atlanta, GA		City & State 28 Atlanta, GA		4. FEI Number 65-0094561	
Zip 24 30309		Country 25 U.S.		Applied For Not Applicable	
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		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	
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 of officer or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE DP ☒ DELETE NAME CORRIGAN, RICHARD STREET ADDRESS FDIC-100 COLONY SQ. BOX 68, SUITE 2200 CITY-ST-ZIP ATLANTA GA 30361			1.1 TITLE DP ☐ Change ☒ Addition 1.2 NAME Lawrence W. Lockwood 1.3 STREET ADDRESS FDIC-1201 W. Peachtree St., Suite 1800 1.4 CITY-ST-ZIP Atlanta, GA 30309		
TITLE DVAS ☐ DELETE NAME RAY, PATRICIA J STREET ADDRESS FDIC-100 COLONY SQ. BOX 68, SUITE 2200 CITY-ST-ZIP ATLANTA GA 30361			2.1 TITLE ☒ Change ☐ Addition 2.2 NAME FDIC-1201 W. Peachtree St., Suite 1800 2.3 STREET ADDRESS Atlanta, GA 30309 2.4 CITY-ST-ZIP		
TITLE DVAS ☐ DELETE NAME FARRELL, CHARLES P STREET ADDRESS FDIC-100 COLONY SQ. BOX 68, SUITE 2200 CITY-ST-ZIP ATLANTA GA 30361			3.1 TITLE ☒ Change ☐ Addition 3.2 NAME FDIC-1201 W. Peachtree St., Suite 1800 3.3 STREET ADDRESS Atlanta, GA 30309 3.4 CITY-ST-ZIP		
TITLE DST ☒ DELETE NAME ROSSETTI, JOHN P STREET ADDRESS FDIC-100 COLONY SQ. BOX 68, SUITE 2200 CITY-ST-ZIP ATLANTA GA 30361			4.1 TITLE DST ☐ Change ☒ Addition 4.2 NAME Gary L. Thompson 4.3 STREET ADDRESS FDIC-1201 W. Peachtree St., Suite 1800 4.4 CITY-ST-ZIP Atlanta, GA 30309		
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP			6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		
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: <i>Lawrence W. Lockwood</i> Lawrence W. Lockwood, President			3-18-97 (404) 817-2569		



CR2E034 (9/96)