

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90016 014 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P02142**

1. Corporation Name
VESTA INSURANCE CORPORATION

Principal Place of Business
**3760 RIVER RUN DRIVE
 P.O. BOX 43360
 BIRMINGHAM AL 35243**

Mailing Address
**3760 RIVER RUN DRIVE
 P.O. BOX 43360
 BIRMINGHAM AL 35243**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21
 Suite, Apt. #, etc.
 22
 City & State
 23
 Zip Country
 24

2a. Mailing Address
 26
 Suite, Apt. #, etc.
 27
 City & State
 28
 Zip Country
 29

3. Date Incorporated or Qualified
05/22/1984

4. FEI Number
63-0854319

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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE FLORIDA INSURANCE COMMISSIONER
 THE CAPITOL BUILDING
 TALLAHASSEE FL 32301**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PATRICK, BARRY A	1.2 NAME	Tait, James E.
STREET ADDRESS	3760 RIVER RUN DRIVE	1.3 STREET ADDRESS	3760 River Run Drive
CITY-ST-ZIP	BIRMINGHAM AL 35243	1.4 CITY-ST-ZIP	Birmingham, AL 35243
TITLE	CD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	V/CONTROLLER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HUFFMAN, ROBERT Y.	2.2 NAME	Cronin, William P.
STREET ADDRESS	3760 RIVER RUN DRIVE	2.3 STREET ADDRESS	3760 River Run Drive
CITY-ST-ZIP	BIRMINGHAM AL 35243	2.4 CITY-ST-ZIP	Birmingham, AL 35243
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	P/D/C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAYLE, NORMAN W. III	3.2 NAME	Gayle, Norman W. III
STREET ADDRESS	3760 RIVER RUN DRIVE	3.3 STREET ADDRESS	3760 River Run Drive
CITY-ST-ZIP	BIRMINGHAM AL 35243	3.4 CITY-ST-ZIP	Birmingham, AL 35243
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	V/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANGELL, CHARLES M.	4.2 NAME	Meredith, Brian R.
STREET ADDRESS	3760 RIVER RUN DRIVE	4.3 STREET ADDRESS	3760 River Run Drive
CITY-ST-ZIP	BIRMINGHAM AL 35243	4.4 CITY-ST-ZIP	Birmingham, AL 35243
TITLE	V <input checked="" type="checkbox"/> DELETE	5.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COONEY, ROBERT K.	5.2 NAME	Nofen, Bobby L.
STREET ADDRESS	3760 RIVER RUN DRIVE	5.3 STREET ADDRESS	3760 River Run Drive
CITY-ST-ZIP	BIRMINGHAM AL 35243	5.4 CITY-ST-ZIP	Birmingham, AL 35243
TITLE	CATS <input checked="" type="checkbox"/> DELETE	6.1 TITLE	See Attached list
NAME	HEIBEIN, MARY BETH	6.2 NAME	
STREET ADDRESS	3760 RIVER RUN DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL 35243	6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: *Arthur J. Gonzales* Arthur J. Gonzales
 _____ Assoc. Gen'l. Counsel & Asst. Sec. 4-21-99 205-970-7142
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/1/98)

**OFFICERS AND DIRECTORS
VESTA INSURANCE CORPORATION**

475551-90016-14
702142

Officers

Norman W. Gayle, III	Chairman, President, CEO and COO
James E. Tait	Executive Vice President and Chief Financial Officer
Charles M. Angell	Senior Vice President-Insurance Operations
William P. Cronin	Senior Vice President and Controller
Brian R. Meredith	Senior Vice President-Finance and Treasurer
Bobby L. Nolen	Senior Vice President-Field Operations
Donald W. Thornton	Senior Vice President-General Counsel and Secretary
Peter J. Hildebrand	Vice President-Claims and Regulatory Compliance
William B. Naff	Vice President-Financial Reporting
Stephen P. Russell	Vice President-Actuarial
Stephen P. Solimine	Vice President-Marketing
James R. Wiseman	Vice President-Taxes
Arthur J. Gonzales	Associate General Counsel and Assistant Secretary
Larsen R. Larsen	Assistant Secretary

Directors

Norman W. Gayle, III, Chairman
James E. Tait
Donald W. Thornton

The mailing address for each of the above listed officers and directors is as follows:

3760 River Run Drive
Birmingham, AL 35243