

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Tallahassee, Florida  
32399-0001  
www.flsos.state.fl.us

APPROVED  
AND  
FILED

55 MAY -1 11:10:25

DOCUMENT # **P02396**

(0)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MISSION LIFE INSURANCE COMPANY

**1. Name and Address of Insurer**  
9235 KATY FREEWAY  
400  
HOUSTON TX 77024  
US

**2. Name and Address of Agent**  
9235 KATY FREEWAY  
HOUSTON TX 77024

FLORIDA DEPARTMENT OF STATE

<b>3. Date of Incorporation in Jurisdiction</b> 06/14/1984	<b>3a. Date of Last Report</b> 05/27/1994
<b>4. ID Number</b> 74-1075316	Applied For Not Applicable
<b>5. Certificate Status Desired</b> <input type="checkbox"/> Renew <input type="checkbox"/> Surrender	<b>\$8.75 Additional Fee Required</b>
<b>6. Election to Waive or Elect to Pay Trust Fund Contributions</b> <input type="checkbox"/> Waive <input checked="" type="checkbox"/> Elect to Pay	<b>\$5.00 May Be Added to Fees</b>
<b>8. This corporation has authority for registration for underwriting purposes in Florida</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

<b>21. Name of Agent</b>	<b>26. State of Agent</b>
<b>22. Name of Agent</b>	<b>27. State of Agent</b>
<b>23. Name of Agent</b>	<b>28. State of Agent</b>
<b>24. Name of Agent</b>	<b>29. State of Agent</b>
<b>25. Name of Agent</b>	<b>30. State of Agent</b>

**9. Name and Address of Current Registered Agent**

FLORIDA INSURANCE COMMISSIONER  
THE CAPITOL BUILDING  
TALLAHASSEE FL 32301

<b>81. Name</b>	
<b>82. Street Address</b>	Not Applicable
<b>83. City</b>	
<b>84. State</b>	FL
<b>85. Zip Code</b>	

**11. This agent has been duly licensed by the State of Florida and is authorized to act as an agent for the purpose of this report. The agent has been duly licensed by the State of Florida and is authorized to act as an agent for the purpose of this report. The agent has been duly licensed by the State of Florida and is authorized to act as an agent for the purpose of this report.**

<b>12. Name</b>	PD EARTHMAN, MICHAEL R. 9235 KATY FREEWAY HOUSTON TX
<b>13. Name</b>	VTD EARTHMAN, DONALD C. 9235 KATY FREEWAY HOUSTON TX
<b>14. Name</b>	SD EARTHMAN, BLANCHE B. 4639 IVANHOE HOUSTON TX
<b>15. Name</b>	D EARTHMAN, J.B. 4639 IVANHOE HOUSTON TX
<b>16. Name</b>	D EARTHMAN, BETSY 2414 PELHAM HOUSTON TX
<b>17. Name</b>	D EARTHMAN, JERRIE 9235 KATY FREEWAY HOUSTON TX

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<b>100. Name</b>	

9235 KATY FREEWAY

SIGNATURE:

*Donald C. Earthman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF INSURER

Donald C. Earthman, Executive Vice President/Treasurer

5/1/95

(713) 984-1517