

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 APR 16 PM 12: 58



DOCUMENT # P03683
1. Entity Name
ASSURED INVESTORS LIFE COMPANY

Principal Place of Business 13737 NOEL ROAD STE 100 DALLAS, TX 75240	Mailing Address 13737 NOEL ROAD STE. 100 ATTN: DONNA JARRELL DALLAS, TX 75240
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03272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 84-0592412	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees
300097959383
04/23/07--01016--025 **150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	NEWMAN, STEPHEN L 3 IMPERIAL PROMENADE STE. 300 SANTA ANA, CA 92707
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD LARSEN, CAITLIN M 13737 NOEL ROAD STE. 100 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SHERMAN, JEFFREY S 13737 NOEL ROAD STE. 100 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS MACK, KRISTINA A 13737 NOEL ROAD STE. 100 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT JEFFERY FLOCKEN 13737 NOEL Rd ste 100 DALLAS TX 75240
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment to an address, with all other like empowered.

SIGNATURE: Caitlin Larsen 3/27/07 469-893-2701
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #