PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.									
REINSTATEMENT				Secretary	TMENT OF STATE y of State corporations	, ,	FILED MAY -2 PM 1: 40 OF TABLE OF STATE		
DOCUMENT # P12253 1. Corporation Name						- IALI	SE MON CE DIATE AHADSET E L <mark>URIBA</mark>		
Liberty Bankers Life Insurance Company						80 05/12	000 74 5396 2/0601067024	i 48 ∗∗458.75	
2. Principal Office Address 1800 Valley View Lane 1800 \					L EIMS	1 ATEMEN	14.06		
Suite, Apt. #	Suite, Apt. #, etc. Suite, Apt. # 300			etc.	-	4. Date Incorp		11/14/57	
			City & State Dallas			4. Date Incorporated or Qualified Inc 11/14/57 To Do Business in Florida FL 11/21/86 5. FELNumber 25-1093227 Applied For Not Applicable			
^{zip} 75234	1	Country	^{Zip} 75234		COUNTY	6.	SOLETATUE DEGIDED (7) \$8.75 A	Additional Fee required Certificate of Status	
	7. Name and Address of Current Registered Agent CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Suite, Apt. #, Etc.								
		tation					State 33324		
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN REGISTERED AGENT MUST SIGN									
9. Names	and Street A	Addresses of Each Officer and	l/or Director (Flo	orida nonpre	ofit corporations must list at I	least 3 directors)			
Titles	1	Name of Officers and/or Directors			Street Address of Eac Officer and/or Directo		City / State / Zip		
D&P	Bradf	ord A. Phillips		1800 Valley View Ste. 300			Dallas, TX 752	34	
D	Corne	elius Turner		207 \	West Amite S	St. #10	Jackson, MS 3	9201	
D	Ronal	ld F. Akin		1750 Valley View			Dallas, TX 752	34	
D	Dixie	Marie Jordan		2916 Regency Court			Oklahoma City,	OK 73120	
D	William James Hogan		112 Sarson Court			Taos, NM 8757	71		
S	Louis	Joseph Corna	ì	1800	Valley View	Ste 300	Dallas, TX 752	34	
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE: Bradford A. Phillips 972-484-6063 Daylime Phone #									
i		SIGNATURE AND LIFED OR TO	WIED HARE OF	SIGNING OF	FICER OR DIRECTOR		Date Dayum	e Phone #	

Corporation Reinstatement

Item 9. continued

<u>Title</u>	Name of Officer	Street Address	City/State/Zip
T	Steven A. Abney	1800 Valley View Ln Ste 200	Dallas, TX 75234
Asst S	Sara Frederick	1800 Valley View Ln Ste 300	Dallas, TX 75234
VP	Steven A. Wilson	9800 Woodway Dr	Waco, TX 76712
VP	Michael D. Devault	9800 Woodway Dr.	Waco, TX 76712
VP	Thomas F. Sackmann	1800 Valley View Ln Ste 300	Dallas, TX 75234

LIBERTY BANKERS LIFE INSURANCE COMPANY 1800 Valley View Lane, Suite 300 Dallas, Texas 75234 (972) 484-6063 Fax (469) 522-4380

April 26, 2006

Division of Corporations
Florida Department of State
2661 Executive Center Circle – Clifton Building
Tallahassee, FL 32301

via Federal Express

RE:

Liberty Bankers Life Insurance Company

Document #P12253

Dear Representative:

Enclosed please find our Annual Report Filing for the years 2004, 2005 and 2006. We are including a check for \$458.75 to cover the filing fees and the Certificate of Status. We ask that you please waive the \$600.00 penalty as we never received the post card notification.

Should you have any questions please contact Brenda Lewis at 469-522-4356.

Sincerely,

Bradford A. Phillips

President

enclosure