2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843378

Entity Name: MEMBERS LIFE INSURANCE COMPANY

Current Principal Place of Business:

5910 MINERAL POINT ROAD
MADISON, WI 53705

Current Mailing Address:

5910 MINERAL POINT ROAD
MADISON, WI 53705 US

FEI Number: 39-1236386

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 EAST GAINES STREET
TALLAHASSEE, FL 32399 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	DIRECTOR		Title	TREASURER
Name	ANDERSON, MICHAEL F.		Name	BORAKOVE, BRIAN
Address	5910 MINERAL POINT ROAD		Address	5910 MINERAL POINT ROAD
City-State-Zip:	MADISON WI 53705		City-State-Zip:	MADISON WI 53705
Title	DIRECTOR		Title	PRESIDENT & CEO
Name	BOSCO, JEFFREY		Name	BOSCO, M. JEFFREY
Address	5910 MINERAL POINT ROAD		Address	5910 MINERAL POINT ROAD
City-State-Zip:	MADISON WI 53705		City-State-Zip:	MADISON WI 53705
Title	DIRECTOR		Title	DIRECTOR
Name	DEFNET, MICHAEL T.		Name	PISARIK, JASON A.
Address	5910 MINERAL POINT ROAD		Address	5910 MINERAL POINT ROAD
City-State-Zip:	MADISON WI 53705		City-State-Zip:	MADISON WI 53705
Title	DIRECTOR, SECRETARY			
Name	SULESKI, STEVEN R.			
Address	5910 MINERAL POINT ROAD			
City-State-Zip:	MADISON WI 53705			

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN R. SULESKI   SECRETARY   03/30/2016

Electronic Signature of Signing Officer/Director Detail   Date