

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/14

**CORPORATION
REINSTATEMENT**

FILED

01 OCT 26 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 814472

1. Corporation Name

Family Life Insurance Company

2. Principal Office Address

2101 4th Avenue

Suite, Apt. #, etc.

Suite 700

City & State

Seattle, WA

Zip

98121-2371

Country

3. Mailing Office Address

6500 River Place Blvd.

Suite, Apt. #, etc.

Building One

City & State

Austin, Texas

Zip

78730

Country

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida**

06/07/1960

5. FEI Number

91-0550883

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Insurance Commissioner

Street Address (P.O. Box Number is Not Acceptable)

Capitol Building

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32304

700004679077-3

11714701-01066-024

***908.75 ***908.75

LS

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

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CDP	Roy F. Mitte	6500 River Place Blvd., Bldg 1	Austin, TX 78730
DVP	Thomas C. Richmond	6500 River Place Blvd., Bldg 1	Austin, TX 78730
DVP	Steven P. Schmitt	6500 River Place Blvd., Bldg 1	Austin, TX 78730
DVPs	Theodore A. Fleron	6500 River Place Blvd., Bldg 1	Austin, TX 78730
DVP	James M. Grace	6500 River Place Blvd., Bldg 1	Austin, TX 78730
DVP	Jeffrey H. Dangen	6500 River Place Blvd., Bldg 1	Austin, TX 78730

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 under section 119.07(3)(f), 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:

[Handwritten Signature]

Melanie McCaffree

10-18-01 (512) 404-5065

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2004

<u>Name</u>	<u>Title</u>
Roy F. Mitte	Chairman of the Board, President and Chief Executive Officer, Director
James M. Grace	Executive Vice President, and Chief Financial Officer, Director
Thomas C. Richmond	Executive Vice President, Chief Administrative Officer, and Treasurer, Director
Jeffrey H. Demgen	Executive Vice President of Sales and Marketing, Director
Steven P. Schmitt	Executive Vice President (office expires 12/31/01), Director
Theodore A. Fleron	Senior Vice President, General Counsel and Secretary, Director
David C. Hopkins	Senior Vice President, Controller and Assistant Secretary
Nigel S. Walker	Senior Vice President, Controller and Assistant Secretary
Sheryl Kinlaw	Senior Vice President and Assistant Secretary
John M. Welliver	Senior Vice President and Chief Underwriter, Director
Walter L. Reed	Senior Vice President
Roberta A. Mitchell	Senior Vice President
John W. Peasley	Senior Vice President
Robert D. Rue	Senior Vice President, Director
Cindy Hall-Davis	Senior Vice President
Robert S. Cox	Senior Vice President
Sharon D. Rickey	Senior Vice President

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Laurie C. Black	Senior Vice President
Ricardo A. Cruz	Senior Vice President
Peter A. Tritz	Senior Vice President
Kevin O'Leary	Senior Vice President
Ken Schneider	Senior Vice President
Larry W. Home	Senior Vice President
Robert A. Bender	Vice President
Buddy Perkins	Vice President
Jack Dillon	Vice President
Al Saathoff	Vice President
Karen Brinson	Vice President
Dana Byrd	Vice President
Peggy Mordah	Vice President
Lloyd F. Rhodes	Vice President
Chad J. Johnson	Vice President
Melanie McCaffree	Vice President
Thomas A. Parnella	Vice President
Michele Reeves	Vice President
Connie Bierman	Vice President
Sherry A. Stroud	Vice President

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Family Life

*Family Life Insurance Company
P.O. Box 149138
Austin, TX 78714-9138
512-404-5000 or 800-925-6000*

October 23, 2001

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Re: Family Life Insurance Company
Reinstatement Form -Document #814472**

Dear Sir or Madam:

Enclosed is a completed original Reinstatement form for Family Life Insurance Company for year dissolved 2000 and 2001. I have enclosed a check in the amount of \$908.75 to cover for the filing fees, and we will anticipate to file an annual report in year 2002.

If you should have any questions, please call me at 800-925-6000 ext. 5067. Thank you for your assistance in this matter.

Sincerely,

Melissa Martinez
Administrative Assistant

Enclosure