

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90421 015 ***150.00

DOCUMENT # P07552
 1. Entity Name
FORETHOUGHT LIFE INSURANCE COMPANY



Principal Place of Business
**700 STATE ROAD 46E
 BATESVILLE, IN 47006-8835 US**

Mailing Address
**700 STATE ROUTE 46E
 C/O CORPORATE TAX DEPT
 BATESVILLE, IN 47006-8835 US**

14014581



2. Principal Place of Business
One Forethought Center

3. Mailing Address
One Forethought Center

Suite, Apt. #, etc.

03292005 Chg-P CR2E034 (10/03)

City & State
Batesville, IN

City & State
Batesville, IN

Zip
47006-9170

Country
U.S.

4. FEI Number
06-1016329

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**CHIEF FINANCIAL OFFICER
 P O BOX 6200 (32314-6200)
 200 E. GAINES ST
 TALLAHASSEE, FL 32399-0000**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROCKWOOD, FREDERICK W 700 STATE ROUTE 46E BATESVILLE, IN 470068835 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ZERKLE, JOHN R 700 STATE ROUTE 46E BATESVILLE, IN 470068835 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LANNING, MARK R 700 STATE ROUTE 46E BATESVILLE, IN 470068835 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD LANG, STEPHEN R 700 STATE ROUTE 46E BATESVILLE, IN 470068835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition One Forethought Center Batesville, IN 47006
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP YANKO, JOHN B 700 STATE ROUTE 46E BATESVILLE, IN 470068835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition One Forethought Center Batesville, IN 47006
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BURKE, CHRISTOPHER J 700 STATE ROUTE 46E BATESVILLE, IN 470068835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition One Forethought Center Batesville, IN 47006

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 with an address, with all other like empowered.

SIGNATURE: Adanne Paroullette **4/28/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
P07552/14014581

2005 For Profit Corporation Annual Report
Additional Officers

Title	VD	Addition
Name	Russell, Charles Andrew	
Street Address	One Forethought Center	
City-ST-Zip	Batesville, IN 47006	
Title	SD	Addition
Name	Mullen, David Kevin	
Street Address	One Forethought Center	
City-ST-Zip	Batesville, IN 47006	
Title	S	Addition
Name	Willoughby, Mark Alan	
Street Address	One Forethought Center	
City-ST-Zip	Batesville, IN 47006	
Title	VTD	Addition
Name	Marek, Ronald Joseph	
Street Address	One Forethought Center	
City-ST-Zip	Batesville, IN 47006	
Title	D	Addition
Name	Poulos, Michael James	
Street Address	One Forethought Center	
City-ST-Zip	Batesville, IN 47006	