

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # **P07552** (3)

1. Corporation Name
FORETHOUGHT LIFE INSURANCE COMPANY



Principal Place of Business: **FORETHOUGHT CENTER BATESVILLE IN 47006 US**
Mailing Address: **FORETHOUGHT CENTER BATESVILLE IN 47006 US**

2. Principal Place of Business: **21 700 State Route 46E**
22 City & State: **23 Batesville, IN**
24 Zip: **47006** 25 Country: **US**
2a. Mailing Address: **26 700 State Route 46E**
27 City & State: **28 Batesville, IN**
29 Zip: **47006** 30 Country: **US**

3. Date Incorporated or Qualified: **09/26/1985** 3a. Date of Last Report: **02/08/1995**
4. FEI Number: **06-1016329** Applied For: **Not Applicable**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 193.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **FLORIDA INSURANCE COMMISSIONER THE CAPITOL BLDG. MONROE STREET TALLAHASSEE FL 32301**
10. Name and Address of New Registered Agent: **81 Name: 82 Street Address (P.O. Box Numbers Not Acceptable): 83: 84 City: 85 Zip Code: FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE: PC	10. NAME: ROCKWOOD, FREDERICK W.	11. TITLE: PD	9. NAME: Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
12. STREET ADDRESS: FORETHOUGHT CENTER BATESVILLE IN	13. CITY-STATE-ZIP: 47006	14. CITY-STATE-ZIP: State Route 46E	15. CITY-STATE-ZIP: 47006
16. TITLE: S	17. NAME: LINDENMEYER, MARK R.	18. TITLE: T	19. NAME: Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
18. STREET ADDRESS: 1069 STATE ROUTE 46 E BATESVILLE IN	21. CITY-STATE-ZIP: 47006	22. STREET ADDRESS: State Route 46E	23. CITY-STATE-ZIP: 47006
24. TITLE: AT	25. NAME: LANNING, MARK R.	26. TITLE: T	27. NAME: Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
28. STREET ADDRESS: 1069 STATE ROUTE 46 E BATESVILLE IN	31. CITY-STATE-ZIP: 47006	29. STREET ADDRESS: State Route 46E	30. CITY-STATE-ZIP: 47006
32. TITLE: V	33. NAME: COFFIN, RICHARD N.	34. TITLE: T	35. NAME: Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
36. STREET ADDRESS: FORETHOUGHT CENTER BATESVILLE IN	41. CITY-STATE-ZIP: 47006	37. STREET ADDRESS: State Route 46E	38. CITY-STATE-ZIP: 47006
42. TITLE: V	43. NAME: BISCHOFF, WILLIAM	44. TITLE: T	45. NAME: Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
46. STREET ADDRESS: FORETHOUGHT CENTER BATESVILLE IN	51. CITY-STATE-ZIP: 47006	47. STREET ADDRESS: State Route 46E	48. CITY-STATE-ZIP: 47006
52. TITLE: V	53. NAME: BISCHOFF, WILLIAM	49. TITLE: T	50. NAME: Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
54. STREET ADDRESS: FORETHOUGHT CENTER BATESVILLE IN	61. CITY-STATE-ZIP: 47006	51. STREET ADDRESS: State Route 46E	52. CITY-STATE-ZIP: 47006
62. TITLE: V	63. NAME: BISCHOFF, WILLIAM	53. TITLE: T	64. NAME: Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
66. STREET ADDRESS: FORETHOUGHT CENTER BATESVILLE IN	71. CITY-STATE-ZIP: 47006	55. STREET ADDRESS: State Route 46E	76. CITY-STATE-ZIP: 47006

14. I do hereby certify that the information supplied on this filing is voluntarily furnished and does not qualify for the exemption provided in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if change, or in an add, if new, with an add.

SIGNATURE: *Mark R. Lindenmeyer* 3/29/96 (812) 934-7821
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **Mark R. Lindenmeyer, Secretary**

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**FORE
THOUGHT®**

FORETHOUGHT LIFE INSURANCE COMPANY

BOARD OF DIRECTORS

Daniel A. Hillenbrand
W August Hillenbrand
Frederick W. Rockwood
Tom E. Brewer
Lonnie M. Smith

OFFICERS

Frederick W. Rockwood - President & Chief Executive Officer
Richard N. Coffin - Sr. VP - Chief Financial Officer and Assistant Treasurer
John W. Prentice - Sr. Vice President - Funeral Director SBU
Stephen R. Lang - Vice President - Funeral Counselor SBU
John Hegwood - Vice President - Information Services
LeRoy Robbins - Vice President - Life Operations
John B. Yanko - Vice President & Chief Actuary
Judith Wright - VP - Legal Services, Chief Counsel & Assistant Secretary
Chris Ruberg - Vice President Strategy and Development
Mark Jorgensen - Vice President Funeral Director SBU
Mark R. Lindenmeyer - Secretary
Deborah S. Wright - Assistant Secretary
Mark R. Lanning - Treasurer
Martha E. Junker - Assistant Secretary
Mark A. Willoughby - Assistant Secretary

All Officers and Directors terms expire February 21, 1997

FORETHOUGHT LIFE INSURANCE COMPANY
FORETHOUGHT CENTER
BATESVILLE, INDIANA 47006