

1.) CORPORATION NAME:

SENTRY LIFE INSURANCE COMPANY

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F0157042**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	400,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

WI

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1800 NORTH POINT DR

CITY/ST/ZIP: STEVENS POINT, WI 54481

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	MARK R HACKL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1800 NORTH POINT DRIVE		
CITY/ST/ZIP/CO:	STEVENS POINT, WI 54481		
NAME:	MICHAEL J WILLIAMS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1800 NORTH POINT DR		
CITY/ST/ZIP/CO:	STEVENS POINT, WI 54481		
NAME:	DALE R. SCHUH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	1800 NORTH POINT DRIVE		
CITY/ST/ZIP/CO:	STEVENS POINT, WI 54481		
NAME:	PETER G. MCPARTLAND	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1800 NORTH POINT DRIVE		
CITY/ST/ZIP/CO:	STEVENS POINT, WI 54481		
NAME:	JAMES J. WEISHAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1800 NORTH POINT DRIVE		
CITY/ST/ZIP/CO:	STEVENS POINT, WI 54481		
NAME:	Kenneth J. Erler	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1800 North Point Drive		
CITY/ST/ZIP/CO:	Stevens Point, WI 54481		

NAME:	James E. Davenport	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1800 North Point Drive		
CITY/ST/ZIP/CO:	Stevens Point, WI 54481		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ Kenneth J.Erler	Kenneth J.Erler,	8/7/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.