

1.) CORPORATION NAME:

**GERBER LIFE INSURANCE COMPANY**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802**

DUE DATE: **7/31/2011**

SCC ID NO: **F0215444**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,940,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**NY**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1311 MAMARONECK AVENUE

CITY/ST/ZIP: WHITE PLAINS, NY 10605-

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: WESLEY PROTHEROE  
TITLE: PRESIDENT  
ADDRESS: 1311 MAMARONECK AVE  
CITY/ST/ZIP/CO: WHITE PLAINS, NY 10605-

OFFICER

DIRECTOR

NAME: ROBERT J LODEWICK JR  
TITLE: VP/S/GC  
ADDRESS: 1311 MAMARONECK AVE  
CITY/ST/ZIP/CO: WHITE PLAINS, NY 10605-

OFFICER

DIRECTOR

NAME: GEORGE P THACKER  
TITLE: CMO  
ADDRESS: 1311 MAMARONECK AVE  
CITY/ST/ZIP/CO: WHITE PLAINS, NY 10605-

OFFICER

DIRECTOR

NAME: WARREN SILBERSTEIN  
TITLE: SVP  
ADDRESS: 1311 MAMARONECK AVE  
CITY/ST/ZIP/CO: WHITE PLAINS, NY 10605-

OFFICER

DIRECTOR

NAME: KEITH O'REILLY  
TITLE: SR VP/T/CFO  
ADDRESS: 1311 MAMARONECK AVE  
CITY/ST/ZIP/CO: WHITE PLAINS, NY 10605-

OFFICER

DIRECTOR

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.

<u>/s/ ROBERT J LODEWICK JR</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>ROBERT J LODEWICK JR, VP/S/GC</u> PRINTED NAME AND CORPORATE TITLE	<u>7/26/2011</u> DATE
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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.