

1.) CORPORATION NAME:

Investors Life Insurance Company of North America

DUE DATE: **9/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F0218935**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	40,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

TX

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 WEST 11TH ST

CITY/ST/ZIP: KANSAS CITY, MO 64105

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PHILIP K. POLKINGHORN	
TITLE:	PRESIDENT	
ADDRESS:	300 W. 11TH STREET	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64105	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MARK K FALLON	
TITLE:	VP/T/AS/CFO/CIO	
ADDRESS:	300 WEST 11TH ST	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64105	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RODNEY K FOSTER	
TITLE:	VICE PRESIDENT	
ADDRESS:	300 W. 11TH STREET	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64105	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ROBERT J GRAHAM	
TITLE:	VICE PRESIDENT	
ADDRESS:	300 W. 11TH STREET	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64105	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	GREGORY HAMILTON	
TITLE:	VICE PRESIDENT	
ADDRESS:	300 W. 11TH STREET	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64105	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JACK L FORTINI	
TITLE:	VP-LEGAL/S	
ADDRESS:	300 WEST 11TH ST	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64105	

NAME:	GARY L MULLER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	COB/CEO		
ADDRESS:	300 WEST 11TH ST		
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64105		

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/ JACK L FORTINI	JACK L FORTINI, VP-LEGAL/S	8/4/2014
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.