

1.) CORPORATION NAME:

FUNERAL DIRECTORS LIFE INSURANCE COMPANY

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1304536**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

TX

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6550 DIRECTORS PKWY

CITY/ST/ZIP: ABILENE, TX 79606

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.

<p>NAME: BILLY KRIS SEALE TITLE: PRESIDENT ADDRESS: 6550 DIRECTORS PKWY CITY/ST/ZIP/CO: ABILENE, TX 79606</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MARK S FRANCE TITLE: EXEC VP-ACTUARY ADDRESS: 9709 TREE BEND DRIVE CITY/ST/ZIP/CO: AUSTIN, TX 78750</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: PAT BAXTER TITLE: EXEC VP/COO ADDRESS: 6550 DIRECTORS PKWY CITY/ST/ZIP/CO: ABILENE, TX 79606</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: TODD MICHAEL CARLSON TITLE: VICE PRESIDENT ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: TERRY LEIGH GROBAN TITLE: EXEC VP/CFO ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: PAUL ROLAND LOVELACE TITLE: VICE PRESIDENT ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: DAWSON MARTIN RODRIGUEZ, JR TITLE: VICE PRESIDENT ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JEFFREY WAYNE STEWART TITLE: VICE PRESIDENT ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JAMES ALLAN ADAMS TITLE: DIRECTOR ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RUDY JACK CYPERT TITLE: DIRECTOR ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JERRY THOMAS EDWARDS TITLE: DIRECTOR ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROBERT ELLIOTT HAMIL TITLE: DIRECTOR ADDRESS: 6550 DIRECTORS PARKWAY CITY/ST/ZIP/CO: ABILENE, TX 79606	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> 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.		
/s/ TERRY LEIGH GROBAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TERRY LEIGH GROBAN, EXEC VP/CFO PRINTED NAME AND CORPORATE TITLE	8/1/2013 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.		