

1.) CORPORATION NAME:

**Alfa Life Insurance Corporation**

DUE DATE: **6/30/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
KENNETH T GEE  
4480 COX RD STE 300  
GLEN ALLEN, VA 23060-6718**

SCC ID NO: **F1475542**

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:

**AL**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2108 E SOUTH BLVD

CITY/ST/ZIP: MONTGOMERY, AL 36116-

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: JERRY ALLEN NEWBY  
TITLE: P/CEO  
ADDRESS: 2108 E SOUTH BLVD  
CITY/ST/ZIP/CO: MONTGOMERY, AL 36116-

OFFICER

DIRECTOR

NAME: CLYDE LEE ELLIS III  
TITLE: TREASURER  
ADDRESS: 2108 E SOUTH BLVD  
CITY/ST/ZIP/CO: MONTGOMERY, AL 36116-

OFFICER

DIRECTOR

NAME: HERMAN ALAN SCOTT  
TITLE: SECRETARY  
ADDRESS: 2108 E SOUTH BLVD  
CITY/ST/ZIP/CO: MONTGOMERY, AL 36116-

OFFICER

DIRECTOR

NAME: ROBERT E ROBISON  
TITLE: SRVP-L & L OPS  
ADDRESS: 2108 E. S. BLVD  
CITY/ST/ZIP/CO: MONTGOMERY, AL 36116-

OFFICER

DIRECTOR

NAME: STEPHEN G RUTLEDGE  
TITLE: EXEC VP, B/D  
ADDRESS: 2108 E SOUTH BLVD  
CITY/ST/ZIP/CO: MONTGOMERY, AL 36116-

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/ HERMAN ALAN SCOTT</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>HERMAN ALAN SCOTT, SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>4/22/2011</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.