

No. <b>C 85362</b>	<b>Due no later than Dec 31, 2007</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> HORACE MANN EDUCATOR BENEFITS CONSULTING CORPORATION ALICE A. LOWRY ATTN: TAX DEPARTMENT #1 HORACE MANN PLAZA SPRINGFIELD IL 62715	CORPORATION SERVICE COMPANY 1401 SHORELINE DR SUITE 2 BOISE ID 83702  3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	DOUGLAS W REYNOLDS	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
DIRECTOR	LOUIS G LOWER II	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
DIRECTOR	ROBERT B JOYNER	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
DIRECTOR	PETER H HECKMAN	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
DIRECTOR	FRANK D'AMBRA III	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
DIRECTOR	ANN M CAPARROS	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
DIRECTOR	PAUL D ANDREWS	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
TREASURER	ANGELA S CHRISTIAN	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
SECRETARY	ANN M CAPARROS	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
PRESIDENT	LOUIS G LOWER II	1 HORACE MANN PLAZA	SPRINGFIELD	IL	USA	62715
5. Organized Under the Laws of:  <b>IL</b> <b>C 85362</b>	6. Annual Report must be signed.* Signature: Alice A. Lowry Name (type or print): Alice A. Lowry		Date: 12/21/2007 Title: VP & Tax Director			
Processed 12/21/2007		* Electronically provided signatures are accepted as original signatures.				