

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000005088

FILED  
Feb 23, 2010  
Secretary of State

**Entity Name:** ARKANSAS BLUE CROSS AND BLUE SHIELD, A MUTUAL INSURANCE COMPANY

**Current Principal Place of Business:**

601 GAINES STREET  
LITTLE ROCK, AR 72201

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2181  
LITTLE ROCK, AR 722032181

**New Mailing Address:**

**FEI Number:** 71-0226428

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** BLAKELY, CAROLYN F PHD  
**Address:** 1200 N UNIVERSITY MAIL SLOT 4931  
**City-St-Zip:** PINE BLUFF, AR 71611

**Title:** D  
**Name:** BRITTAIN, SUSAN  
**Address:** PO BOX 518  
**City-St-Zip:** MALVERN, AR 72104

**Title:** D  
**Name:** BROTHERS, ROBERT V  
**Address:** PO BOX 809  
**City-St-Zip:** ROGERS, AR 727570809

**Title:** D  
**Name:** GREENWAY, MARK  
**Address:** PO BOX 777  
**City-St-Zip:** LOWELL, AR 72745

**Title:** D  
**Name:** JESSON, BRADLEY D  
**Address:** PO BOX 10127  
**City-St-Zip:** FORT SMITH, AR 729170127

**Title:** D  
**Name:** KELLEY, JAMES V  
**Address:** PO BOX 789  
**City-St-Zip:** TUPELO, MS 388020789

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** LEE DOUGLASS JR.

MR.

02/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date

F09000005088

2-23-10

ARKANSAS BLUE CROSS AND BLUE SHIELD  
BOARD OF DIRECTORS

Mahlon O. Maris, M.D.  
Box 1597  
Harrison, AR 72602-1597

James Leslie Wyatt, III, Ph.D.  
1503 E. Nettleton Ave.  
Jonesboro, AR 72401

J. Thomas May  
P. O. Box 7009  
Pine Bluff, AR 71611

Hayes C. McClerkin  
P. O. Box 3053  
Texarkana, AR 75504

George K. Mitchell, M.D. (Vice Chairman)  
1511 North Fillmore  
Little Rock, AR 72207

Dan Nabholz  
2500 Brookfield Dr.  
Conway, AR 72032-4495

Marla Johnson Norris  
401 West Capitol Suite 700  
Little Rock, AR 72201

Ben Owens  
225 E. Jackson  
Jonesboro, AR 72401

Robert L. Shoptaw (Chairman of the Board)  
P. O. Box 2181  
Little Rock, AR 72203-2181

Patty Smith  
6101 North State Line  
Texarkana, TX 75501

Sherman Tate  
1 Allied Drive  
Little Rock, AR 72202

P. Mark White  
71 Vigne Blvd.  
Little Rock, Arkansas