

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2002 8:00 am
Secretary of State

02-10-2002 90015 047 ***150.00

069899 AT

DOCUMENT # P04346
 1. Entity Name
PROVIDENT AMERICAN LIFE & HEALTH INSURANCE COMPA NY

Principal Place of Business 17800 ROYALTON RD STRONGSVILLE OH 44136 US	Mailing Address 17800 ROYALTON RD STRONGSVILLE OH 44136 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 23-1335885	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent
**INSURANCE COMMISSIONER
 THE CAPITOL
 TALLAHASSEE FL 32304**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State FL
Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME	<input type="checkbox"/> Delete
P PINO, ANTHONY J STREET ADDRESS 17800 ROYALTON RD CITY-ST-ZIP STRONGSVILLE OH 44136	
S STANDISH, LINDA S STREET ADDRESS 17800 ROYALTON RD CITY-ST-ZIP STRONGSVILLE OH 44136	<input checked="" type="checkbox"/> Delete
CFOV MILLER, CHARLES E JR. STREET ADDRESS 17800 ROYALTON RD CITY-ST-ZIP STRONGSVILLE OH 44136	<input type="checkbox"/> Delete
VP CAZONE, DAVID STREET ADDRESS 17800 ROYALTON RD CITY-ST-ZIP STRONGSVILLE OH 44136	<input type="checkbox"/> Delete
T KUSNIC, RICHARD STREET ADDRESS 17800 ROYALTON RD CITY-ST-ZIP STRONGSVILLE OH 44136	<input type="checkbox"/> Delete
VT WHARTON, LARRY E STREET ADDRESS 17800 ROYALTON RD CITY-ST-ZIP STRONGSVILLE OH 44136	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Secretary Arthur L. Hastings STREET ADDRESS 17800 Royalton Rd CITY-ST-ZIP Strongsville, Ohio 44136	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeffrey A. Johnson **REQUIRE** 1/18/02 (440) 878-7654
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)