## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H11958

**Entity Name: COMPBENEFITS COMPANY** 

**Current Principal Place of Business:** 

5775 BLUE LAGOON DRIVE SUITE 400

MIAMI, FL 33126

**Current Mailing Address:** 

P.O. BOX 740026

ATTN: TAX DEPARTMENT

LOUISVILLE, KY 40201-7426 US

FEI Number: 59-2531815 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

**500 WEST MAIN STREET** 

CHIEF FINANCIAL OFFICER 200 E. GAINES ST.

TALLAHASSEE, FL 32399 US

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:

Address

Name

Name

Electronic Signature of Registered Agent

Date

FILED Apr 04, 2016

**Secretary of State** 

CC8490083552

Officer/Director Detail:

Title TREASURER Title VICE PRESIDENT

Name BAILEY, ALAN Name ROBINSON, HANK

City-State-Zip: LOUISVILLE KY 40202 City-State-Zip: LOUISVILLE KY 40202

Title SECRETARY Title DIRECTOR

Name LENAHAN, JOAN O Name BROUSSARD , BRUCE D.

Address 500 WEST MAIN STREET Address 500 WEST MAIN ST

City-State-Zip: LOUISVILLE KY 40202 City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR Title DIRECTOR, SENIOR VICE PRESIDENT

Address

**500 WEST MAIN STREET** 

AND CFO
MURRAY, JAMES

Address 500 W MAIN STREET KANE, BRIAN A

City-State-Zip: LOUISVILLE KY 40202

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

City-State-Zip: LOUISVILLE KY 40202

Title SEGMENT VICE PRESIDENT AND Title PRESIDENT

PRESIDENT, SMALL BUSINESS &

LARGE GROUP Name BIERBOWER, ELIZABETH
QUIRAM, TAMARA L Address 500 WEST MAIN STREET

Address 1100 EMPLOYERS BOULEVARD City-State-Zip: LOUISVILLE KY 40202

City-State-Zip: DEPERE WI 54115

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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: HANK ROBINSON VICE PRESIDENT 04/04/2016

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Name

ZIPPERLE, CYNTHIA

PRESIDENT, RETAIL SEGMENT Title Title VICE PRESIDENT Name WHEATLEY, TIMOTHY ALAN Name ARNHOLD, STEPHEN M Address 500 WEST MAIN STREET Address 500 WEST MAIN STREET LOUISVILLE KY 40202 City-State-Zip: LOUISVILLE KY 40202 City-State-Zip:

Title VICE PRESIDENT AND CHIEF Title VICE PRESIDENT AND APPOINTED ACTUARY

**COMPLIANCE OFFICER** Name CANINE, JONATHAN Name CATRON, JOHN GREGORY Address 500 WEST MAIN STREET Address 500 WEST MAIN STREET City-State-Zip: LOUISVILLE KY 40202 LOUISVILLE KY 40202 City-State-Zip:

Title VICE PRESIDENT AND CHIEF ACTUARY Title VICE PRESIDENT, GROUP SEGMENT

City-State-Zip:

LOUISVILLE KY 40202

Name KAN, KENNY **LEADERSHIP** Name MATZKE, MARK

Address 500 WEST MAIN STREET Address 500 WEST MAIN STREET City-State-Zip: LOUISVILLE KY 40202

City-State-Zip: LOUISVILLE KY 40202 Title VICE PRESIDENT - INVESTMENT MANAGEMENT

Title VICE PRESIDENT, GROUP SEGMENT Name PRESTON, WILLIAM MARK Name REMMERS, RICHARD D Address 500 WEST MAIN STREET Address 500 WEST MAIN STREET City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT Title VICE PRESIDENT Name WILSON, RALPH M

Name ZACHARIAS, TOD Address 500 WEST MAIN STREET Address 500 WEST MAIN STREET LOUISVILLE KY 40202 City-State-Zip:

City-State-Zip: LOUISVILLE KY 40202 VICE PRESIDENT AND CHIEF ACCOUNTING Title

**OFFICER** Title ASSISTANT CORPORATE **SECRETARY** 

Name VENTURA, JOSEPH Address 500 WEST MAIN STREET

Address 500 WEST MAIN STREET City-State-Zip: LOUISVILLE KY 40202 City-State-Zip: LOUISVILLE KY 40202