

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 838468

**Entity Name:** COMPBENEFITS INSURANCE COMPANY

**Current Principal Place of Business:**

2929 BRIARPARK, SUITE 314  
HOUSTON, TX 77042-3719

**Current Mailing Address:**

P.O. BOX 740026  
LOUISVILLE, KY 40201 US

**FEI Number:** 74-2552026

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST  
TALLAHASSEE, FL 32399-0000 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title           TREASURER  
Name           BAILEY, ALAN  
Address        500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title           VICE PRESIDENT  
Name           ROBINSON, HANK  
Address        500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title           SECRETARY  
Name           LENAHAN, JOAN O  
Address        500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title           DIRECTOR  
Name           MURRAY, JAMES E  
Address        500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title           DIRECTOR, PRESIDENT  
Name           BIERBOWER, ELIZABETH  
Address        500 WEST MAIN ST  
City-State-Zip: LOUISVILLE KY 40202

Title           DIRECTOR  
Name           BROUSSARD, BRUCE D  
Address        500 W MAIN ST  
City-State-Zip: LOUISVILLE KY 40202

Title           DIRECTOR, SENIOR VICE PRESIDENT  
                  AND CFO  
Name           KANE, BRIAN A  
Address        500 W MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title           DIRECTOR, PRESIDENT, RETAIL  
                  SEGMENT  
Name           WHEATLEY, TIMOTHY ALAN  
Address        500 W MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

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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 :**

Title SEGMENT VICE PRESIDENT AND PRESIDENT,  
SMALL BUSINESS AND LARGE GROUP  
Name QUIRAM, TAMARA  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title SENIOR VICE PRESIDENT  
Name MARGULIS, HEIDI  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND CHIEF COMPLIANCE  
OFFICER  
Name CATRON, JOHN GREGORY  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT, GROUP SEGMENT  
LEADERSHIP  
Name MATZKE, MARK  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

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

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

Title ASSISTANT CORPORATE SECRETARY  
Name VENTURA, JOSEPH  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title SENIOR VICE PRESIDENT AND CHIEF  
INFORMATION OFFICER  
Name LECLAIRE, BRIAN P  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND APPOINTED  
ACTUARY  
Name CANINE, JONATHAN  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND CHIEF  
ACTUARY  
Name KAN, KENNY  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT - INVESTMENT  
MANAGEMENT  
Name PRESTON, WILLIAM MARK  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT  
Name WILSON, RALPH M  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND CHIEF  
ACCOUNTING OFFICER  
Name ZIPPERLE, CYNTHIA  
Address 500 WEST MAIN STREET  
City-State-Zip: LOUISVILLE KY 40202