

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 851719

**FILED**  
**Jan 17, 2013**  
**Secretary of State**  
**CC8509596736**

**Entity Name:** UNITED AMERICAN INSURANCE COMPANY

**Current Principal Place of Business:**

3700 S STONEBRIDGE DR  
MCKINNEY, TX 75070

**Current Mailing Address:**

3700 S. STONEBRIDGE DRIVE  
MCKINNEY, TX 75070 US

**FEI Number:** 73-1128555

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
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 DIRECTOR  
Name LUTEK, BEN W  
Address 2901 CEDAR RIDGE DRIVE  
City-State-Zip: MCKINNEY TX 75070

Title PRESIDENT, CEO  
Name HERBEL, VERN D  
Address 1007 S. WELLINGTON POINT ROAD  
City-State-Zip: MCKINNEY TX 75070

Title VP  
Name GOCKEL, DOUGLAS  
Address 6915 GLENBROOK  
City-State-Zip: DALLAS TX 75252

Title SVP  
Name HENRIE, MICHAEL S  
Address 4600 ANISLEY DRIVE  
City-State-Zip: PLANO TX 75024

Title SENIOR VICE PRESIDENT  
Name ADAMS, JON A  
Address 6333 BRYAN PARKWAY  
City-State-Zip: DALLAS TX 75214

Title DIRECTOR  
Name SVOBODA, FRANK M  
Address 3340 PECAN HOLLOW CT  
City-State-Zip: GRAPEVINE TX 76051

*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:** JON A. ADAMS

**SENIOR VICE PRESIDENT 01/17/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date