

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21193

**Entity Name:** UNITED PROSPERITY LIFE INSURANCE COMPANY

**FILED**  
**Feb 13, 2014**  
**Secretary of State**  
**CC8131719984**

**Current Principal Place of Business:**

30775 BAINBRIDGE RD.  
SUITE 210  
SOLON, OH 44139

**Current Mailing Address:**

30775 BAINBRIDGE RD.  
SUITE 210  
SOLON, OH 44139 US

**FEI Number: 86-0265010**

**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 COO, TREASURER  
Name KLOSS, JOHN  
Address 30775 BAINBRIDGE RD.  
SUITE 210  
City-State-Zip: SOLON OH 44139

Title SECRETARY  
Name BAYER, STEPHANIE  
Address 30775 BAINBRIDGE RD.  
SUITE 210  
City-State-Zip: SOLON OH 44139

Title PRESIDENT  
Name GARDYNIK, JOHN  
Address 30775 BAINBRIDGE RD.  
SUITE 210  
City-State-Zip: SOLON OH 44139

Title DIRECTOR  
Name NOBLES, DIANE  
Address 30775 BAINBRIDGE RD.  
SUITE 210  
City-State-Zip: SOLON OH 44139

Title DIRECTOR  
Name POPOLI, MATT  
Address 30775 BAINBRIDGE RD.  
SUITE 210  
City-State-Zip: SOLON OH 44139

Title DIRECTOR  
Name KANG, JEFF  
Address 30775 BAINBRIDGE RD.  
SUITE 210  
City-State-Zip: SOLON OH 44139

Title DIRECTOR  
Name MONTEMAYOR, JOSE  
Address 30775 BAINBRIDGE RD.  
SUITE 210  
City-State-Zip: SOLON OH 44139

Title DIRECTOR  
Name REUTZEL, ERIC  
Address 30775 BAINBRIDGE RD.  
SUITE 210  
City-State-Zip: SOLON OH 44139

*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: JOHN KLOSS**

**COO & TREASURER**

**02/13/2014**

Electronic Signature of Signing Officer/Director Detail

Date