

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 16, 2001 8:00 am
Secretary of State

02-16-2001 90011 041 ***150.00

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DOCUMENT # 814420

1. Entity Name

TRIGON HEALTH AND LIFE INSURANCE COMPANY

Principal Place of Business

2015 STAPLES MILL RD
MAIL DROP 02B
RICHMOND VA 23230
US

Mailing Address

P. O. BOX 27401
MAIL DROP 02B
RICHMOND VA 23230
US

2. Principal Place of Business

2235 Staples Mill Road

Suite, Apt. #, etc.

Mail Drop 74B

City & State

Richmond, VA 23230

Zip

23230

Country

USA

3. Mailing Address

P.O. Box 27401

Suite, Apt. #, etc.

Mail Drop 74 B

City & State

Richmond, VA

Zip

23230

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

54-1637426

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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

Signature, typed or printed name of registered agent and title if applicable.

(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, 2001 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 PD
NAME SNEAD, THOMAS G JR
STREET ADDRESS 2221 EDWARD HOLLAND DR
CITY-ST-ZIP RICHMOND VA 23230 ☐ Delete

TITLE S
NAME WILTSHIRE, JAMES C
STREET ADDRESS 2015 STAPLES MILL RD.
CITY-ST-ZIP RICHMOND VA ☐ Delete

TITLE DTCF
NAME BYRD, THOMAS R
STREET ADDRESS 2221 EDWARD HOLLAND DR
CITY-ST-ZIP RICHMOND VA 23230 ☐ Delete

TITLE V
NAME BAMBACUS, LINDA G
STREET ADDRESS 602 S JEFFERSON ST
CITY-ST-ZIP ROANOKE VA 24011 ☒ Delete

TITLE V
NAME HINKEL, JAMES S
STREET ADDRESS 602 S JEFFERSON ST
CITY-ST-ZIP ROANOKE VA 24011 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 2235 Staples Mill Road
CITY-ST-ZIP Richmond, VA 23230 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE Valuation Actuary
NAME Brian S. Renshaw
STREET ADDRESS 2221 Edward Holland Drive
CITY-ST-ZIP Richmond, VA 23230 ☐ Change ☒ 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:

J. Christopher Wiltshire
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/01

Date

(804) 354-7284

Daytime Phone #

J. Christopher Wiltshire, Secretary

CR2E034 (10/00)