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03-22-1999 90031 020 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 820799

1. Corporation Name
PROVIDENT NATIONAL ASSURANCE COMPANY

Principal Place of Business	Mailing Address
1 FOUNTAIN SQUARE CHATTANOOGA TN 37402 US	1 FOUNTAIN SQUARE CHATTANOOGA TN 37402 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/16/1967

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

4. FEI Number: 42-0930962 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FLORIDA INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. *Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.*

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VS	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ROTH, SUSAN NANCE		1.2 NAME		
STREET ADDRESS	2913 REYNARD TRAIL		1.3 STREET ADDRESS		
CITY-ST-ZIP	SIGNAL MT. TN 37377		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE	V/T	☒ Change ☐ Addition
NAME	ROGERSN, RALPH A JR		2.2 NAME	Rogers, Ralph A. Jr	
STREET ADDRESS	1 FOUNTAIN SQUARE		2.3 STREET ADDRESS		
CITY-ST-ZIP	CHATTANOOGA TN 37402		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	CHANDLER, J. HAROLD		3.2 NAME		
STREET ADDRESS	1 FOUNTAIN SQUARE		3.3 STREET ADDRESS		
CITY-ST-ZIP	CHATTANOOGA TN 37402		3.4 CITY-ST-ZIP		
TITLE	DV	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WATJEN, THOMAS R.		4.2 NAME		
STREET ADDRESS	1 FOUNTAIN SQUARE		4.3 STREET ADDRESS		
CITY-ST-ZIP	CHATTANOOGA TN 37402		4.4 CITY-ST-ZIP		
TITLE	V	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	FELTON, GLENN P		5.2 NAME		
STREET ADDRESS	1 FOUNTAIN SQUARE		5.3 STREET ADDRESS		
CITY-ST-ZIP	CHATTANOOGA TN 37402		5.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	HEYS, THOMAS B JR		6.2 NAME		
STREET ADDRESS	1 FOUNTAIN SQUARE		6.3 STREET ADDRESS		
CITY-ST-ZIP	CHATTANOOGA TN 37402		6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vicki W. Corbett SIGNATURE REQUIRED 02-26-99 (423) 755-1373
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)

246345-90031-20
820799

PROVIDENT NATIONAL ASSURANCE COMPANY
FEIN: 42-0930962
ATTACHMENT TO FLORIDA CORPORATION ANNUAL REPORT

Box 12:
OFFICERS AND DIRECTORS (CONTINUED)

7.1 D
7.2 Probasco, Scott L. Jr.
7.3 SunTrust Bank
P.O. Box 1638
7.4 Chattanooga, TN 37401

8.1 D
8.2 Sorensen, Burton E.
8.3 Sand Spring Road
8.4 Morristown, NJ 07960

9.1 D
9.2 Armstrong, William L.
9.3 1625 Broadway, Suite 780
9.4 Denver, CO 80202

10.1 D
10.2 Heffner, Charlotte Maclellan
10.3 3655 Randall Hall, NW
10.4 Atlanta, GA 30327

11.1 V
11.2 Olingy, Jeffrey F.
11.3 1 Fountain Square
11.4 Chattanooga, TN 37402

12.1 D
12.2 Bolinder, William H.
12.3 1400 American Way
12.4 Schamburg, IL 60196

13.1 D
13.2 Maclellan, Jr., Hugh O.
13.3 1 Fountain Square
13.4 Chattanooga, TN 37402

ADDITIONS:

14.1 D
14.2 Jacks, Hugh B.
14.3 1 Fountain Square
14.4 Chattanooga, TN 37402

15.1 D
15.2 MacMillan, A.S.
15.3 1 Fountain Square
15.4 Chattanooga, TN 37402

16.1 V
16.2 Greving, Robert C.
16.3 1 Fountain Square
16.4 Chattanooga, TN 37402

17.1 D
17.2 Pollard, William C.
17.3 1 Fountain Square
17.4 Chattanooga, TN 37402

18.1 V
18.2 Madeja, Peter C.
18.3 23 Cabot Court
18.4 Wayne, PA 19087

19.1 V
19.2 Copeland, F. Dean
19.3 1 Fountain Square
19.4 Chattanooga, TN 37402

20.1 V
20.2 Corbett, Vicki W.
20.3 1 Fountain Square
20.4 Chattanooga, TN 37421

21.1 V
21.2 Best, Robert O.
21.3 Fountain Square
21.4 Chattanooga, TN 37402

22.1 D
22.2 Reinemund, Steven S.
22.3 Frito-Lay, Inc
P.O. Box 660634
22.4 Dallas, TX 75266-0636

246375-70031-20
820799

PROVIDENT NATIONAL ASSURANCE COMPANY
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DELETIONS:
23.1 D
23.2 Johnson, William B.
23.3 Suite 2075
3424 Peachtree Road
23.4 Atlanta, GA 30326