

F04000007281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

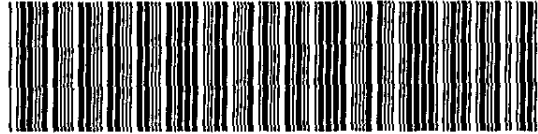
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Plans' Liability Insurance Company
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Susan Lee
(Name of Person)
Plans' Liability Insurance Company
(Firm/Company)
676 North St. Clair Street
(Address)
Chicago IL 60611-2997
(City/State and Zip code)

For further information concerning this matter, please call:

Susan Lee at (312) 951-7842
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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A. DIRECTORS

Chairman: Raymond F. McCaskey

Address: Blue Cross Blue Shield of Illinois

Vice Chairman: N/A

Address: _____

Director: Ronald F. King

Address: _____

Director: Raymond F. McCaskey; President, Blue Cross Blue Shield of Illinois

Address: _____

B. OFFICERS

President: Daniel P. Ryan

Address: Plans' Liability Insurance Company; 676 North St. Clair Street; Chicago IL 60611

Vice President: David P. Behnke

Address: Plans' Liability Insurance Company; 676 North St. Clair Street; Chicago IL 60611

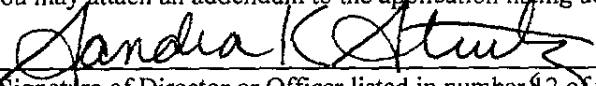
Secretary: Michael T. Westermeyer

Address: Plans' Liability Insurance Company; 676 North St. Clair Street; Chicago, IL 60611

Treasurer: David P. Behnke

Address: See above

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Sandra K. Strutz; Assistant Secretary
(Typed or printed name and capacity of person signing application)

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PLANS' LIABILITY INSURANCE COMPANY

Additional Officers

Chairman of the Board

Raymond F. McCaskey
Blue Cross Blue Shield of Illinois
300 East Randolph Street
Chicago IL 60601-5099

Sr. Vice President

Gerald M. Wawrzaszek
Plans' Liability Insurance Company
676 North St. Clair Street
Chicago IL 60611-2997

Vice President

William Cole
Plans Liability Insurance Company
676 North St. Clair Street
Chicago IL 60611-2997

Assistant Secretary

Sandra K. Strutz
Plans' Liability Insurance Company
676 North St. Clair Street
Chicago IL 60611-2997

Additional Directors

James M. Mead
President & CEO
Capital Blue Cross
2500 Elmerton Avenue
Harrisburg PA 17110

G. Phillip Pope
President
Blue Cross Blue Shield
Of Alabama
450 Riverchase Parkway East
Birmingham AL 35244

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TALLAHASSEE, FLORIDA

**United States of America
State of Ohio
Office of the Secretary of State**

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show PLANS' LIABILITY INSURANCE COMPANY, an Ohio corporation, Charter No. 677461, having its principal location in Worthington, County of Franklin, was incorporated on May 15, 1986 and is currently in GOOD STANDING upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 12th day of November, A.D. 2004*

J. Kenneth Blackwell

Ohio Secretary of State

Validation Number: V2004316N33B0C