

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State
 02-28-2001 90116 008 ***150.00

925493



DO NOT WRITE IN THIS SPACE

DOCUMENT # F93000004661 1. Entity Name ANTHEM INSURANCE COMPANIES, INC.																															
Principal Place of Business 120 MONUMENT CIRCLE INDIANAPOLIS IN 46204 US		Mailing Address 120 MONUMENT CIRCLE INDIANAPOLIS IN 46204 US																													
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																													
City & State		City & State																													
Zip	Country	Zip	Country																												
6. Name and Address of Current Registered Agent INSURANCE COMMISSIONER CAPITOL TALLAHASSEE FL 32399-0300		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																															
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>		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. <input type="checkbox"/>		\$5.00 May Be Added to Fees																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left; padding: 2px;">11. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left; padding: 2px;">12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 30%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="width: 70%; padding: 2px;"> P, CEO GLASSCOCK, LARRY C 7837 MORNINGSIDE LANE INDIANAPOLIS IN 46240 <input type="checkbox"/> Delete </td> <td style="width: 30%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="width: 70%; padding: 2px;"> President / Chief Executive Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204 </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> DC LYTLE, L B 120 MONUMENT CIRCLE INDIANAPOLIS IN <input type="checkbox"/> Delete </td> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> Director / Chairman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> S PURCELL, NANCY L 120 MONUMENT CIR. INDIANAPOLIS IN 46204 <input type="checkbox"/> Delete </td> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> T MARTIN, GEORGE D 120 MONUMENT CIRCLE INDIANAPOLIS IN 46204 <input type="checkbox"/> Delete </td> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> CEO EVP/CFO SMITH, MICHAEL L 4975 DEER RIDGE SOUTH DRIVE CARMEL IN 46033 <input type="checkbox"/> Delete </td> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> Executive Vice President / Chief Financial Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204 </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> EVP/CLAO FRICK, DAVID R 8508 GREEN BRAES SOUTH DRIVE INDIANAPOLIS IN 46234 <input type="checkbox"/> Delete </td> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> Executive Vice President / Chief Legal & Admin Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204 </td> </tr> </table>				11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, CEO GLASSCOCK, LARRY C 7837 MORNINGSIDE LANE INDIANAPOLIS IN 46240 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President / Chief Executive Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC LYTLE, L B 120 MONUMENT CIRCLE INDIANAPOLIS IN <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director / Chairman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PURCELL, NANCY L 120 MONUMENT CIR. INDIANAPOLIS IN 46204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARTIN, GEORGE D 120 MONUMENT CIRCLE INDIANAPOLIS IN 46204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO EVP/CFO SMITH, MICHAEL L 4975 DEER RIDGE SOUTH DRIVE CARMEL IN 46033 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President / Chief Financial Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/CLAO FRICK, DAVID R 8508 GREEN BRAES SOUTH DRIVE INDIANAPOLIS IN 46234 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President / Chief Legal & Admin Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																													
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, CEO GLASSCOCK, LARRY C 7837 MORNINGSIDE LANE INDIANAPOLIS IN 46240 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President / Chief Executive Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204																												
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC LYTLE, L B 120 MONUMENT CIRCLE INDIANAPOLIS IN <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director / Chairman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																												
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PURCELL, NANCY L 120 MONUMENT CIR. INDIANAPOLIS IN 46204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition																												
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARTIN, GEORGE D 120 MONUMENT CIRCLE INDIANAPOLIS IN 46204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition																												
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO EVP/CFO SMITH, MICHAEL L 4975 DEER RIDGE SOUTH DRIVE CARMEL IN 46033 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President / Chief Financial Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204																												
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/CLAO FRICK, DAVID R 8508 GREEN BRAES SOUTH DRIVE INDIANAPOLIS IN 46234 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President / Chief Legal & Admin Officer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 Monument Circle Indianapolis, IN 46204																												
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: <u>Nancy Purcell</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																															
<small>Date Daytime Phone #</small>																															

CR2E034 (10/00)