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May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000006577 (0)

1. Corporation Name

AMERICAN MEDICAL SECURITY, INC.

Principal Place of Business

3100 AMS BLVD.
GREEN BAY WI 54313

Mailing Address

3100 AMS BLVD.
GREEN BAY WI 54313

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1994

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	HILLIARD, WALLACE J	
STREET ADDRESS	4443 INDIAN TRAILS	
CITY-ST-ZIP	GREEN BAY WI	
TITLE	D	DELETE
NAME	WEYERS, RONALD A	
STREET ADDRESS	P O BOX 12057 N/A	
CITY-ST-ZIP	GREEN BAY WI	
TITLE	S	DELETE
NAME	DOLATA, TIMOTHY J	
STREET ADDRESS	3348 PIONEER DR.	
CITY-ST-ZIP	GREEN BAY WI	
TITLE	D	DELETE
NAME	HEFTY, THOMAS R	
STREET ADDRESS	401 W MICHIGAN ST	
CITY-ST-ZIP	MILWAUKEE WI	
TITLE	P	DELETE
NAME	MILLER, SAMUEL V	
STREET ADDRESS	5141 EDGE WATER BEACH RD	
CITY-ST-ZIP	GREEN BAY WI	
TITLE	T	DELETE
NAME	DAY, TIMOTHY L	
STREET ADDRESS	330 SUMAC DR	
CITY-ST-ZIP	GREEN BAY WI	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	Change	Addition
1.2 NAME	Samuel V. Miller		
1.3 STREET ADDRESS	3100 AMS Boulevard		
1.4 CITY-ST-ZIP	Green Bay, WI 54313		
2.1 TITLE	VD	Change	Addition
2.2 NAME	Edward R. Skoldberg		
2.3 STREET ADDRESS	3100 AMS Boulevard		
2.4 CITY-ST-ZIP	Green Bay, WI 54313		
3.1 TITLE	T	Change	Addition
3.2 NAME	Gary D. Guengerich		
3.3 STREET ADDRESS	3100 AMS Boulevard		
3.4 CITY-ST-ZIP	Green Bay, WI 54313		
4.1 TITLE	SD	Change	Addition
4.2 NAME	Timothy J. Moore		
4.3 STREET ADDRESS	3100 AMS Boulevard		
4.4 CITY-ST-ZIP	Green Bay, WI 54313		
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
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 registered 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.

SIGNATURE:

Gary D. Guengerich 4-23-98 920-665-1111

CR2E034 (10/97)