## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # P02558**

1. Entity Name

## LIFE AND HEALTH INSURANCE COMPANY OF AMERICA, IN

2200 WALNUT ST.

Principal Place of Business

Mailing Address

2200 WALNUT ST.

## **FILED** Apr 20, 2000 8:00 am Secretary of State 04-20-2000 90072 035 \*\*\*150.00

Suite, Apr. 4. ofc.  City & State  City & State  A. FEI Number  2-0757800  Applicable Next Applicable Note  4. FEI Number  2-0757800  S. Contificate of Status Delevate  S. Contificate of New Registered Agent  S. Con	PHILADLPHIA P. US	A 19103		PHILADLPHIA PA 19103-5521 US						acac: 6:61: 51	en 210m 1881	
City & State  Country  Country  S. Contribution of Status Desired  S. R. TS Additional Fee Regulated  F	2. Principal P	lace of Busin	ess	3. Mailing Address			-					
Country   Zip   Country   Zip   Country   S. Conflicate of Status Desired   S8.75 Additional rook Required Rook Required Rook Rook Rook Rook Rook Rook Rook Roo	Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE	IN THIS SE	PACE		
E. Name and Address of Current Registered Agent  1. Name and Address of New Registered Agent  1. Name and Address of New Registered Agent  1. Name and Address of New Registered Agent  1. Name  1. Street Address (P.D. Box Number is Nox Acceptable)  1. City  1. Title  1. Title  1. Title  1. Title  1. OFFICERS AND DIRECTORS  1. Deeds  1. OFFICERS AND DIRECTORS  1. Deeds  1. OFFICERS AND DIRECTORS  1. OFFICERS AND DIRECTORS  1. OFFICERS AND DIRECTORS  1. Deeds  1. D	City & State	9		City & State			4. FEI Number 23-0757800				• • • • • • • • • • • • • • • • • • • •	7
Name	Zip		Country	Zip Country		5. (	5 Certificate of Status Desired S8.75 Additional				1	
Name		6. Name	and Address of Current R	ealstered Agent			7. 1	Name and Address of New Reg	istered Ag	gent		1
145 DOE TRAIL JUPITER FL 33458  City FL Zip Code						Name			*			]
B. 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 the purpose of changing its registered office or registered agent, or both, in the State of Florida.    Prints corporation is eligible to satisfy its Intangible Tax filing requirement and officets to 0 so.   Marker MAY 1, 2000 Fee will be \$550.00   Marker MAY 1, 2000 Fee will be \$550	145			Street Address (P.O. Box Number is Not Acceptable)								
SIGNATURE  9. This corporation is eligible to salisty its intangicile Tax filing requirement and elects to do so. (See criteria on back)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  PDC  Make Check Payable to Department of State  MILLER, MELLYN K. 914 EXETER CREST  VILLANOVA PA  VID  WILSON, GRETTA E  201 HAMILTON ST  CHY-ST-2P  PHILADELPHIA PA  TITLE  TD  NAME  SITRET ADDRESS  CHY-ST-2P  OTY-ST-2P  NAME  NAME  STRETA DORESS  CHY-ST-2P  TITLE  TD  NAME  NAME  NAME  NAME  STRETA DORESS  CHY-ST-2P  NAME  N	0011	TENTE OO				City	<del></del>		FL	Zip Coo	de	
Signature, lysed are printed name of registrated agent and thin if explicitable in a specification is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to satisfy its Intanglicite Task filting or group composition is elligible to be added to some composition of the state	8. The above	named entity	y submits this statement for	the purpose of changing it	s registere	ed office or regist	ered ag	ent, or both, in the State of Florid	da.			1
Tax filing requirement and elects to do so.  (See criteria on back)    After MAY 1, 2000   Fee will be \$550.00   Trust Fund Contribution.   Addet to Fee Added to	SIGNATURE .	Signature, typed	or printed name of registered agent ar	d title if applicable (NO	TE: Registere	d Agent signature requir	ed when re	einstating)	DATE			
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				this filing does not qualify for			Section	119,07(3)(i). Florida Statutes J f	urther certi	fy that the	information	1

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:**