
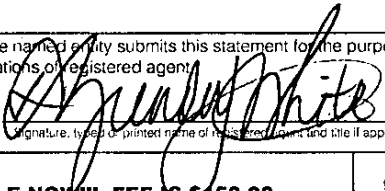
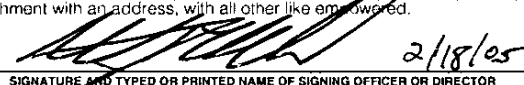


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2005 8:00 am
Secretary of State

02-25-2005 90151 029 ***150.00

| | | | | | |
|---|--|--|--|---|--|
| DOCUMENT # P10626 1. Entity Name PROFESSIONAL LIFE UNDERWRITERS SERVICES, INC. | | | |  | |
| Principal Place of Business 20700 CIVIC CENTER DRIVE SUITE 240 SOUTHFIELD, MI 48076 | | | Mailing Address P.O BOX 837 SOUTHFIELD, MI 48076 | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | 4. FEI Number 38-2317570 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | |
| SPITZER, JAN H. 8525 NORTHWEST 53RD TERRACE #115 MIAMI, FL 33166 | | | | Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island City Plantation FL Zip Code 33324 | |
| 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Brenda L. White Asst. Secretary (NOTE: Registered Agent signature required when reinstating) DATE 2/15/05 | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees. | | See Exhibit "A" | |
| 10. OFFICERS AND DIRECTORS | | | | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | TD MARTIN, ANDREA D 6966 HOLIDAY BLOOMFIELD HILLS, MI | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | Executive Vice President and Treasurer | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | SD YONKMAN, MARK W 1356 BUCKINGHAM GROSSE POINTE PARK, MI | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | Director, Vice President and Anthony G. Morrow Secretary 500 Woodward, MC 3391 Detroit, Michigan 48226 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD WEST, LLOYD A. 2407 ELMHURST AVE ROYAL OAK, MI 48073 | <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 | VD SIEGAL, MICHELE A 20081 RONSDALE BEVERLY HILLS, MI 48025 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | Senior Vice President & Director | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | First Vice President Carl E. Spradlin, Jr. 3551 Hamlin Rd. MC 2413 Auburn Hills, MI | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | V. President and Asst. Secretary Nicole V. Gersch 500 Woodward, MC 3391 Detroit, Michigan 48226 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE:  Anthony G. Morrow 2/18/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # (313) 222-5259 | | | | | |

ATTACHMENT

40023322

P10626

Exhibit A
to 2005 Florida Annual Report
for Professional Life Underwriters Services, Inc.

Title: Vice President
Name: Teresa M. Thornton
Address: 20700 Civic Center Drive
Suite 290, Southfield, MI 48076