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FILED
Mar 26 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P25660

(2)

1. Corporation Name

FOUNDATION HEALTH NATIONAL LIFE INSURANCE COMPAN
Y

Principal Place of Business

Mailing Address

3400 DATA DR.
RANCHO CORDOVA CA 95670

3400 DATA DR.
RANCHO CORDOVA CA 95670-7956



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/18/1989

3a. Date of Last Report

05/01/1996

4. FEI Number

23-2486156

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

FLORIDA INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32399-0300

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 of the person who is the registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
D	KIRK A. BENSON	3400 DATA DRIVE	RANCHO CORDOVA CA	☐
VTD	ELDER, JEFFERY L	3400 DATA DR.	RANCHO CORDOVA CA	☐
S	MARABITO, ALLEN J	3400 DATA DR.	RANCHO CORDOVA CA	☐
V	MUNNO, EDWARD J	1010 N. FINANCE CTR.,STE. 100	TUCSON AZ 85710	☒
DCEO	VELASQUEZ, GARY S	3400 DATA DRIVE	RANCHO CORDOVA CA	☒
D	MAURICE A. COSTA	3400 DATA DRIVE	RANCHO CORDOVA CA	☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	☐ Change	☐ Addition
21 TITLE <td>22 NAME</td> <td>23 STREET ADDRESS</td> <td>24 CITY-ST-ZIP</td> <td>☐ Change</td> <td>☐ Addition</td>	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	☐ Change	☐ Addition
31 TITLE <td>32 NAME</td> <td>33 STREET ADDRESS</td> <td>34 CITY-ST-ZIP</td> <td>☐ Change</td> <td>☐ Addition</td>	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	☐ Change	☐ Addition
41 TITLE <td>42 NAME</td> <td>43 STREET ADDRESS</td> <td>44 CITY-ST-ZIP</td> <td>☐ Change</td> <td>☐ Addition</td>	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	☐ Change	☐ Addition
51 TITLE <td>52 NAME</td> <td>53 STREET ADDRESS</td> <td>54 CITY-ST-ZIP</td> <td>☐ Change</td> <td>☐ Addition</td>	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	☐ Change	☐ Addition
61 TITLE <td>62 NAME</td> <td>63 STREET ADDRESS</td> <td>64 CITY-ST-ZIP</td> <td>☐ Change</td> <td>☐ Addition</td>	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	☐ Change	☐ Addition

14. I do 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 receiver 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: Allen J. Marabito

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Allen J. Marabito

(916) 631-5000

Date

Daytime Phone

CR2E034 (9/96)