FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ÁNNUAL REPORT

1998



FI ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P25660

(2)

FOUNDATION HEALTH NATIONAL LIFE INSURANCE COMPAN

Principal Place of Business

Mailing Address

3400 DATA DR. RANCHO CORDOVA CA 95670 3400 DATA DR.

RANCHO CORDOVA CA 95670

FILED Apr 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

								3. Date Incorporated or Qualified 08/18/1989		
2. Principal Pl	ace of Busin	ness	2a, Mail	2a, Mailing Address 225 NORTH MAIN S				4. FEI Number Applied For		
21 225 NO	RTH MA	IN STREET	26 22	5 NORTH	MAIN	STI	CEET	23-2486156 Not Applicable		
Suite, Apt.	#, e tc		Suite	e, Apt. #. etc.				5. Certificate of Status Desired S8.75 Additional		
22			27					Fee Required		
City & State		le n	City & State				6. Election Campaign Financing \$5.00 May Be			
23 PUEBLO	, CO			BLO, CO				Trust Fund Contribution		
Zip 81003		Country	Zip	003		untry		8. This corporation owes or has paid the current year Intangible		
23			[29]	29 81003 30				Personal Property Tax due June 30. Yes No		
Name and Address of Current Registered Agent						-		10. Name and Address of New Registered Agent		
FLORIDA INSURANCE COMMISSIONER						81 Name				
	E CAPITOL					82 Street Address (P.O. Box Number is Not Acceptable)				
TAL	Lahassei		ļ			B3				
			i							
						64	City	₽ 85 Zip Code		
	 					Ш		FL 24 COO		
office or re	o the provisi e giste red ag	ions of Sections 607 05 jent, or both, in the Sta	302 and 607.15 te of Florida. Si	ida, Horida Statu Jich chande was	ites, the a authorize	obye Boye	e-named the cori	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered		
agent. I ar	n tam iliar wi	th, and accept the obli	gations of, Sec	tion 607. 0505, F	lorida Sta	lutes		,		
SIGNATURE	Sinsalure Jenod	or printed name of registered a	ment and tille it were	cohic (NO	II : Bonisteru	d Ano	nt cinnal re	uve required when reinstating) DATE		
12.	Signato II. (yp. 40)		ND DIRECTOR		13.	A Ago	in agricus o	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D			X DELETE	1.1 1	ITLE		CHAIRMAN OF THE BOARD OF DIR Change Addition		
NAME	KIRK A.	BENSON			1.2 N	AMF		DALE T. BERKBIGLER M.D.		
STREET ADDRESS		ATA DRIVE					ADDRESS	· ·		
CITY-ST-ZIP		O CORDOVA CA				ITY-S		PUEBLO, CO 81003		
TITLE	VID			A DELETE	217		1 - 4-51	Channe ET tradition		
NAME		JEFFERÝ L			22 N			PRESIDENT & CEO		
STREET ADDRESS	3400 DA						ADDRESS			
CITY-ST-ZIP		O CORDOVA CA								
TITLE	8	3 001100111 OA		X DELETE	3.1 TI		1-28	PUEBLO, CO 81003 ACTING ACTIVARY Change Addition		
NAME	•	TO, ALLEN J			3.2 N					
J		TA DR.		•			4 D D D E G G	SHERWOOD Z. SMITH		
STREET ADDRESS		O CORDOVA CA						121000 UANARD SIREEI		
CITY-ST-ZIP TITLE	D	O CONDOYA OA		X DELETE	3.4. C		T-ZIP	WOODLAND HILLS, CA 91367 VICE PRESIDENT & TREASURE Change Addition		
NAME	_	E A. COSTA		M section				VIOL INDUDINI G INDUNE		
		ATA DRIVE			4. 2 N		1000ccc	BRIAN L. CRARY		
STREET ADDRESS		O CORDOVA CA					ADDRESS	22J NORTH MAIN STREET		
CITY-ST-ZIP	MANUAL	O CUNDUVA CA		DELETE		ITY-S	T- 71P	PUEBLO, CO 81003		
TITLE				- DEFEIG	511			SECRETARY Change Addition		
NAME					52 N			B. CURTIS WESTEN		
STREET ADDRESS							ADDRESS -	S 225 NORTH MAIN STREET		
C(TY-ST-ZIP				T 55: 575		ITY-\$	1 - ZIP	PUEBLO, CO 81003		
TITLE				DELETE	6.1 TI			ASSISTANT TREASURER Change Addition		
NAME					6.2 N			KEVIN L. STAAB		
STREET ADDRESS					6.3 S	TREE1	ADDRESS	S 225 NORTH MAIN STREET		
CITY-\$1-ZIP					6.4 C	TY-S		PUEBLO, CO 81003		

4. 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 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.

MONATURE. 16 and MARK

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CR2E034 (10/97)