2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007
Secretary of State

DOCUMENT# P26581

Entity Name: UNITED CONCORDIA INSURANCE COMPANY

Current Principal Place of Business:

4401 DEER PATH ROAD
HARRISBURG, PA 17110 US

New Principal Place of Business:

Current Mailing Address:

4401 DEER PATH ROAD
HARRISBURG, PA 17110 US

New Mailing Address:

FEI Number: 86-0307623 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 323990000 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	CPD	( ) Delete
Name:	DZURYACHKO, THOMAS A.	
Address:	4401 DEER PATH RD	
City-St-Zip:	HARRISBURG, PA 17110	
Title:	VT	( ) Delete
Name:	WRIGHT, DANIEL J	
Address:	4401 DEER PATH RD	
City-St-Zip:	HARRISBURG, PA 17110	
Title:	D	( ) Delete
Name:	VANERSTROM, TODD B	
Address:	120 5TH AVE PL	
City-St-Zip:	PITTSBURGH, PA 15222	
Title:	D	( ) Delete
Name:	DETURK, NANETTE P	
Address:	120 5TH AVE PLACE	
City-St-Zip:	PITTSBURGH, PA 15222	
Title:	D	( ) Delete
Name:	KLEINBERG, NATHAN C	
Address:	2198 EAST CAMELBACK RD., SUITE 260	
City-St-Zip:	PHOENIX, AZ 85016	
Title:	D	( ) Delete
Name:	HANLON, KAREN L	
Address:	120 5TH AVENE PLACE	
City-St-Zip:	PITTSBURGH, PA 15222	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL J WRIGHT V 01/08/2007

Electronic Signature of Signing Officer or Director Date