

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26605

FILED
Apr 15, 2010
Secretary of State

Entity Name: UNITED WISCONSIN INSURANCE COMPANY

Current Principal Place of Business:

12695 W NATIONAL AVE
NEW BERLIN, WI 53151 US

New Principal Place of Business:

15200 WEST SMALL ROAD
NEW BERLIN, WI 53151 US

Current Mailing Address:

POST OFFICE BOX 3026
MILWAUKEE, WI 532013026 US

New Mailing Address:

FEI Number: 39-0941450 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
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: PD
Name: COOPER, STEPHAN
Address: 15200 WEST SMALL ROAD
City-St-Zip: NEW BERLIN, WI 53151

Title: DIR
Name: HESS, STEVEN C
Address: 232 S. CAPITOL AVENUE
City-St-Zip: LANSING, MI 48933

Title: T
Name: KEAL, JAMES T
Address: 232 SOUTH CAPITOL AVENUE
City-St-Zip: LANSING, MI 48933

Title: D
Name: HAAR, ELIZABETH R
Address: 232 SOUTH CAPITOL AVENUE
City-St-Zip: LANSING, MI 48933

Title: D
Name: SCHOEN, RONALD H
Address: 232 SOUTH CAPITOL AVENUE
City-St-Zip: LANSING, MI 48933

Title: SEC
Name: REYNOLDS, STEVEN
Address: 232 SOUTH CAPITOL AVENUE
City-St-Zip: LANSING, MI 48933

I hereby 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 all other like empowered.

SIGNATURE: JAMES T KEAL

T

04/15/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date