

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33018

FILED  
Apr 12, 2011  
Secretary of State

**Entity Name:** VISION SERVICE PLAN INSURANCE COMPANY

**Current Principal Place of Business:**

3333 QUALITY DR  
RANCHO CORDOVA, CA 95670 US

**New Principal Place of Business:**

**Current Mailing Address:**

3333 QUALITY DR  
ATTN: LEGAL DIVISION  
RANCHO CORDOVA, CA 95670 US

**New Mailing Address:**

**FEI Number:** 36-3560825      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COPORATION, SERVICE COMPAN  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: VSD  
Name: BROOKS, GARY N  
Address: 3333 QUALITY DR  
City-St-Zip: RANCHO CORDOVA, CA 95670

Title: DT  
Name: BALL, DONALD J JR.  
Address: 3333 QUALITY DR  
City-St-Zip: RANCHO CORDOVA, CA 95670

Title: PD  
Name: LYNCH, JAMES R  
Address: 3333 QUALITY DRIVE  
City-St-Zip: RANCHO CORDOVA, CA 95670

Title: D  
Name: FESSLER, THOMAS  
Address: 3333 QUALITY DR  
City-St-Zip: RANCHO CORDOVA, CA 95670

Title: D  
Name: JOHNSON, CHERYL A  
Address: 3333 QUALITY DR  
City-St-Zip: RANCHO CORDOVA, CA 95670

Title: D  
Name: STEERE, RICHARD W  
Address: 3333 QUALITY DRIVE  
City-St-Zip: RANCHO CORDOVA, CA 95670

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: GARY N. BROOKS

VSD

04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date