2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2010
Secretary of State

DOCUMENT# V03728

Entity Name: TUCKER LIFE-HEALTH INSURANCE, INC.

Current Principal Place of Business:

741 NEW LIGHT CHURCH RD
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1235
CRAWFORDVILLE, FL 32326

New Mailing Address:

741 NEW LIGHT CHURCH RD
CRAWFORDVILLE, FL 32327

FEI Number: 59-3101412 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUCKER, ROSS E
741 NEW LIGHT CHURCH RD
CRAWFORDVILLE, FL 32327 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: PST
Name: TUCKER, ROSS E
Address: 741 NEW LIGHT CHURCH RD.
City-St-Zip: CRAWFORDVILLE, FL 32327

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: ROSS E. TUCKER PST 01/28/2010

Electronic Signature of Signing Officer or Director Date