2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2014
Secretary of State
CC9080959306

DOCUMENT# 430472

Entity Name: BUPA INSURANCE COMPANY

Current Principal Place of Business:

18001 OLD CUTLER ROAD
SUITE 300
MIAMI, FL 33157

Current Mailing Address:

17901 OLD CUTLER ROAD
SUITE 400
MIAMI, FL 33157 US

FEI Number: 59-1485499

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DODO, MOSES
17901 OLD CUTLER ROAD
SUITE 400
MIAMI, FL 33157 US

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: MOSES DODO, DP 04/03/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D
Name	LOPEZ-PREUSSE, FRANCISCO D
Address	17901 OLD CUTLER ROAD SUITE 400
City-State-Zip:	MIAMI FL 33157

Title	DCFO
Name	STAINES, PAUL DCFO
Address	17901 OLD CUTLER ROAD SUITE 400
City-State-Zip:	MIAMI FL 33157

Title	DIRECTOR
Name	LANG, ROBERT
Address	BUPA HOUSE 15-19 BLOOMSBURY WAY
City-State-Zip:	LONDON WC1A-2BA

Title	DIRECTOR
Name	BANDIN, JORGE
Address	RUSSEL HOUSE
City-State-Zip:	RUSSEL MEWS BRIGHTON BN1 2NL

Title	D
Name	DOCTOROFF, JEFFREY D
Address	60 STATE STREET SUITE 1100
City-State-Zip:	BOSTON MA 02109

Title	DP
Name	DODO, MOSES
Address	17901 OLD CUTLER ROAD SUITE 400
City-State-Zip:	MIAMI FL 33157

Title	DIRECTOR
Name	LOS, STEVEN
Address	BUPA HOUSE 15-19 BLOOMSBURY WAY
City-State-Zip:	LONDON WC1A-2BA

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: MOSES DODO DP 04/03/2014

Electronic Signature of Signing Officer/Director Detail — Date