

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K15834

**FILED  
Mar 12, 2014  
Secretary of State  
CC2158344140**

**Entity Name:** PROGRAM UNDERWRITERS, LIFE & HEALTH BENEFITS CORP.

**Current Principal Place of Business:**

2766 UNIVERSITY DR.  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

2766 UNIVERSITY DR.  
CORAL SPRINGS, FL 33065 US

**FEI Number: 65-0041635**

**Certificate of Status Desired: No**

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

ZISSELMAN, ARNOLD  
2766 UNIVERSITY DR.  
CORAL SPRINGS, FL 33065 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name BUTO, DONNA M  
Address 2766 UNIVERSITY DR.  
City-State-Zip: CORAL SPRINGS FL 33065

Title VPD  
Name BUTO, STEPHEN  
Address 2766 UNIVERSITY DR.  
City-State-Zip: CORAL SPRINGS FL 33065

Title ST  
Name ZISSELMAN, ARNOLD  
Address 2766 UNIVERSITY DR.  
City-State-Zip: CORAL SPRINGS FL 33065

*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: ARNOLD ZISSELMAN**

**SECRETARY**

**03/12/2014**

Electronic Signature of Signing Officer/Director Detail

Date