

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V03728

Entity Name: TUCKER LIFE-HEALTH INSURANCE, INC.

Current Principal Place of Business:

741 NEW LIGHT CHURCH RD
CRAWFORDVILLE, FL 32327

Current Mailing Address:

741 NEW LIGHT CHURCH RD
CRAWFORDVILLE, FL 32327

FEI Number: 59-3101412

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

PRESIDENT

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date