

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214515196

1.) CORPORATION NAME:

Trustmark Voluntary Benefit Solutions, Inc.

DUE DATE: **4/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1892100**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	9,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

WI

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1035 West Glen Oaks Lane
Suite 200

CITY/ST/ZIP: Mequon, WI 53092

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Alex Moral		
TITLE:	PRESIDENT		
ADDRESS:	1035 West Glen Oaks Lane Suite 200		
CITY/ST/ZIP/CO:	Mequon, WI 53092		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Dennis L. Schoff		
TITLE:	SECRETARY		
ADDRESS:	1035 West Glen Oaks Lane Suite 200		
CITY/ST/ZIP/CO:	Mequon, WI 53092		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Paul T. Schuster		
TITLE:	TREASURER		
ADDRESS:	1035 West Glen Oaks Lane Suite 200		
CITY/ST/ZIP/CO:	Mequon, WI 53092		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Joseph L. Pray		
TITLE:	DIRECTOR		
ADDRESS:	1035 West Glen Oaks Lane Suite 200		
CITY/ST/ZIP/CO:	Mequon, WI 53092		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Philip A. Goss		
TITLE:	DIRECTOR		
ADDRESS:	1035 West Glen Oaks Lane Suite 200		
CITY/ST/ZIP/CO:	Mequon, WI 53092		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ Dennis L.Schoff	Dennis L.Schoff,	3/22/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		