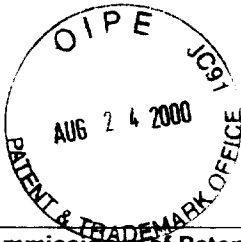


09-21-2000



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RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New 8-24-00
- Resubmission (Non-Recordation)
Document ID #
- Correction of PTO Error
Reel # Frame #
- Corrective Document
Reel # Frame #

Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
Effective Date
Month Day Year
- Merger
- Change of Name
- Other

Conveying Party

Mark if additional names of conveying parties attached

Name Execution Date
Month Day Year

Formerly

- Individual General Partnership Limited Partnership Corporation Association
- Other
- Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

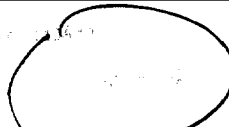
Address (line 2)

Address (line 3)

- Individual General Partnership Limited Partnership If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)
- Corporation Association
- Other

Citizenship/State of Incorporation/Organization

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Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20501. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
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REEL: 002142 FRAME: 0814

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages Enter the total number of pages of the attached conveyance document including any attachments. #

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="2,354,845"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of Properties

Enter the total number of properties involved.

#

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes

No

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

John W. Behringer

Name of Person Signing



Signature

8/24/00

Date Signed

TRADEMARK ASSIGNMENT

The District of Columbia)
 ss:
)

WHEREAS, ULLICO Inc., a Maryland corporation, whose address is 111 Massachusetts Avenue, N.W., Washington, D.C. 20001, has adopted, used and is using the mark PREFERRED UNITED PLANS A COMMUNITY HEALTH CARE CONCEPT, which is registered in the United States Patent and Trademark Office, Registration No. 2,354,845, dated June 6, 2000; and

WHEREAS, SecureOne Benefit Administrators, Inc. (Assignee), a Michigan (state) corporation, whose address is Suite 420, Riverview Center, Grand Rapids, Michigan 49501, is desirous of acquiring said mark and the registration thereof:

NOW, THEREFORE, for One dollar (\$1.00) and other good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, said ULLICO Inc. does hereby assign unto the said SecureOne Benefit Administrators, Inc. (Assignee) all right, title and interest in and to the said mark, together with the good will of the business symbolized by the mark, and the above-identified registration thereof.

ULLICO Inc.

By: *James W. Luce*
Name: James W. Luce
Title: Executive Vice President

On this 31st day of July, 2000, before me appeared James W Luce, the person who signed this instrument, who acknowledged that he signed it as a free act on behalf of the identified corporation.

Vita M Makle
Notary Public

DC MAIN 28059 v 1

320/Corporate Secretary/Projects
PUP/TRADEMARK ASSIGNMENT 2

Vita M. Makle
Notary Public, District of Columbia
My Commission Expires October 31, 2004