

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 SEP 30 PM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-10/02/02--01015--016
***1350.00 ***1350.00

DOCUMENT #

1. Corporation Name

Oxford Health Plans, Inc.

F96000005497

2. Principal Office Address
48 Monroe Turnpike

3. Mailing Office Address
48 Monroe Turnpike

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Trumbull, CT

City & State
Trumbull, CT

Zip
06611

Country
US

Zip
06611

Country
US

REINSTATEMENT 98-02

**4. Date Incorporated or Qualified
To Do Business in Florida** March 13, 1996

5. FEI Number
06-1118515

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ **\$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State
FL

Zip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

**Signature of
Registered Agent**

John L. Lott

REGISTERED AGENT MUST SIGN

Date 9/11/02

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres COO	Charles G. Berg	48 Monroe Turnpike	Trumbull, CT 06611
EVP CMO	Alan Muney, M.D., M.H.A.	48 Monroe Turnpike	Trumbull, CT 06611
EVP CFO	Kurt B. Thompson	48 Monroe Turnpike	Trumbull, CT 06611
EVP, GC SEC	Dan Gregoire	48 Monroe Turnpike	Trumbull, CT 06611
CEO DIR	Norman C. Payson, M.D.	48 Monroe Turnpike	Trumbull, CT 06611
SEE ATTACHMENT FOR ADDITIONAL DIRECTORS			

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/27/02 (203) 459-10504
Date Daytime Phone #

CR2E081 (9/01)

js 9/30/02

DIRECTORS

David Bonderman
Tarrant Partners, L.P. & Texas Pacific Group,
Fort Worth, TX

Jonathan Coslet
Tarrant Partners, L.P. & Texas Pacific Group,
Fort Worth, TX

Robert B. Milligan, Jr.
Fairchester, Inc.
18 Tilley Ave, Newport RI

Frederick Nazem
Nazem, Inc.,
New York, New York

Jay Brown, Jr.
MBIA, Inc.,
113 King Street
Armonk, NY

Ellen Rudnick
University of Chicago
1101 East 58th St.
Chicago, IL 60637

Benjamin Safirstein, M.D.
Better Breathing Association,
Montclair, NJ

Kent J. Thiry
DaVita
21250 Hawthorne Blvd.
Torr, CA