

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 07, 2011
Secretary of State

Entity Name: COVENTRY HEALTH CARE OF FLORIDA, INC.

Current Principal Place of Business:

6705 ROCKLEDGE DRIVE
BETHESDA, MD 20817 US

New Principal Place of Business:

6705 ROCKLEDGE DRIVE
SUITE 900
BETHESDA, MD 20817 US

Current Mailing Address:

6705 ROCKLEDGE DRIVE
BETHESDA, MD 20817 US

New Mailing Address:

6705 ROCKLEDGE DRIVE
SUITE 900
BETHESDA, MD 20817 US

FEI Number: 65-0986441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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:

04/07/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: CIANO, CHRISTOPHER A
Address: 6705 ROCKLEDGE DRIVE, SUITE 900
City-St-Zip: BETHESDA, MD 20817 US

Title: VP
Name: WEISS, RICHARD
Address: 6705 ROCKLEDGE DRIVE, SUITE 900
City-St-Zip: BETHESDA, MD 20817 US

Title: TRE
Name: RUHLMANN, JOHN J
Address: 6705 ROCKLEDGE DRIVE, SUITE 900
City-St-Zip: BETHESDA, MD 20817 US

Title: SEC
Name: SMITH, SHIRLEY R
Address: 6705 ROCKLEDGE DRIVE, SUITE 900
City-St-Zip: BETHESDA, MD 20817 US

Title: AT
Name: TUOZZO, MELINDA L
Address: 6705 ROCKLEDGE DRIVE, SUITE 900
City-St-Zip: BETHESDA, MD 20817 US

Title: ACT
Name: FINKELMAN, ROBERT J
Address: 6705 ROCKLEDGE DRIVE, SUITE 900
City-St-Zip: BETHESDA, MD 20817 US

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: SHIRLEY R. SMITH

SEC

04/07/2011

Electronic Signature of Signing Officer or Director

Date