## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001705

Entity Name: BLUE CROSS AND BLUE SHIELD OF FLORIDA FOUNDATION,

INC.

FILED
Apr 25, 2022
Secretary of State
5907207909CC

## **Current Principal Place of Business:**

4800 DEERWOOD CAMPUS PARKWAY JACKSONVILLE, FL 32246

## **Current Mailing Address:**

4800 DEERWOOD CAMPUS PARKWAY JACKSONVILLE, FL 32246

FEI Number: 59-3707820 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

MACCARTHY, DEIRDRE M 4800 DEERWOOD CAMPUS PARKWAY DCC 100-7 JACKSONVILLE, FL 32246 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 SECRETARY, DIRECTOR Title DIRECTOR, CHAIRMAN

Name GRIFFIN, CYNTHIA Name READ, KIM

Address 4800 DEERWOOD CAMPUS PARKWAY Address 4800 DEERWOOD CAMPUS PARKWAY

DC 4-3 DC 1-5

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

Title VP Title DIRECTOR, TREASURER

Name TOWLER, SUSAN Name BAILEY, GORDON

Address 4800 DEERWOOD CAMPUS PARKWAY Address 4800 DEERWOOD CAMPUS PARKWAY

DC 8-2 DC 8-2

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR Title DIRECTOR

Name KERN, FARLEY Name TROTTER-MITCHELL, SHAWN

Address 4800 DEERWOOD CAMPUS PARKWAY Address 4800 DEERWOOD CAMPUS PARKWAY

DC 1-8 DC1-8

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.