

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 364687

Entity Name: UNITEDHEALTHCARE OF FLORIDA, INC.**Current Principal Place of Business:**495 NORTH KELLER ROAD
SUITE 200
MAITLAND, FL 32751**Current Mailing Address:**495 NORTH KELLER ROAD
SUITE 200
MAITLAND, FL 32751 US**FEI Number:** 59-1293865**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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
Name	MURDOCK, SARAH ANN
Address	495 NORTH KELLER ROAD SUITE 200
City-State-Zip:	MAITLAND FL 32751
Title	DIRECTOR
Name	LAWTON, MICHAEL SHERMAN
Address	495 NORTH KELLER ROAD SUITE 200
City-State-Zip:	MAITLAND FL 32751
Title	DIRECTOR
Name	ZAFFIRIS, NICHOLAS JEFFREY
Address	495 NORTH KELLER ROAD SUITE 200
City-State-Zip:	MAITLAND FL 32751
Title	ASSISTANT SECRETARY
Name	LANG, HEATHER ANASTASIA
Address	495 NORTH KELLER ROAD SUITE 200
City-State-Zip:	MAITLAND FL 32751

Title	TREASURER
Name	GILL, PETER MARSHALL
Address	495 NORTH KELLER ROAD SUITE 200
City-State-Zip:	MAITLAND FL 32751
Title	DIRECTOR
Name	REIDY, GREGORY DAVID
Address	495 NORTH KELLER ROAD SUITE 200
City-State-Zip:	MAITLAND FL 32751
Title	DIRECTOR
Name	ZITUR, JONATHON KEITH
Address	495 NORTH KELLER ROAD SUITE 200
City-State-Zip:	MAITLAND FL 32751
Title	DIRECTOR
Name	HALPERN, LORI IRIS
Address	495 NORTH KELLER ROAD SUITE 200
City-State-Zip:	MAITLAND FL 32751

Continues on page 2

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: HEATHER ANASTASIA LANG**ASSISTANT SECRETARY 04/24/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT, GOVERNMENT PROGRAMS
Name LAWTON, MICHAEL SHERMAN
Address 495 NORTH KELLER ROAD
 SUITE 200
City-State-Zip: MAITLAND FL 32751

Title PRESIDENT
Name ZAFFIRIS, NICHOLAS JEFFREY
Address 495 NORTH KELLER ROAD
 SUITE 200
City-State-Zip: MAITLAND FL 32751

Title ASSISTANT SECRETARY
Name ZUBA, JESSICA LEIGH
Address 495 NORTH KELLER ROAD
 SUITE 200
City-State-Zip: MAITLAND FL 32751

Title CFO
Name ZITUR, JONATHON KEITH
Address 495 NORTH KELLER ROAD
 SUITE 200
City-State-Zip: MAITLAND FL 32751

Title CEO
Name ZAFFIRIS, NICHOLAS JEFFREY
Address 495 NORTH KELLER ROAD
 SUITE 200
City-State-Zip: MAITLAND FL 32751

Title VP
Name COTTINGTON, NYLE BRENT
Address 495 NORTH KELLER ROAD
 SUITE 200
City-State-Zip: MAITLAND FL 32751