

2023 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000058220

Entity Name: HEALTHSPRING OF FLORIDA, INC.

FILED
Apr 10, 2023
Secretary of State
1678754149CC

Current Principal Place of Business:

8600 NW 41ST STREET
SUITE 201
DORAL, FL 33166

Current Mailing Address:

8600 NW 41ST STREET
SUITE 201
DORAL, FL 33166 US

FEI Number: 65-1129599

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH 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 DIRECTOR
Name MARILL-KIRKPATRICK, MERCY
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title DIRECTOR, PRESIDENT
Name SAATHOFF, STEPHEN
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name WURST, ERIC
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title ASSISTANT SECRETARY
Name BERNIER, RHIANNON
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title SECRETARY
Name BROWN, GENEVA
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title VP, ASSISTANT TREASURER
Name FLEMING, MARK
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title VP, ASSISTANT TREASURER
Name HART, JOANNE
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title VICE PRESIDENT, TREASURER
Name LAMBERT, SCOTT
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

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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: SCOTT LAMBERT

TREASURER

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name LEONE, STEFANIE
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title ASSISTANT SECRETARY
Name METROW, SUSAN
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title ASSISTANT SECRETARY
Name PEREZ, LYNN
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title VP
Name ROOKER, TODD
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title ASSISTANT TREASURER
Name SIDDIQUI, JUMANA
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title APPOINTED ACTUARY
Name SKRIPOL, REBECCA
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title ASSISTANT VICE PRESIDENT
Name MCKEON, CASEY
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title ASSISTANT VICE PRESIDENT
Name MOREAU, JENNIFER
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title VP, ASSISTANT TREASURER
Name REYNOLDS, DREW
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title ASSISTANT SECRETARY
Name SCHMEHL, SANDRA J.
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title VP
Name VANGELI, MARIO
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166

Title ASSISTANT ACTUARY
Name AHMANN, MELISSA
Address 8600 NW 41ST STREET
SUITE 201
City-State-Zip: DORAL FL 33166