

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077892

Entity Name: SOUTH FLORIDA AFFILIATED HEALTH INSURERS, INC.

Current Principal Place of Business:

1060 WINCHESTER ROAD NE
HUNTSVILLE, AL 35811

Current Mailing Address:

5867 TRIPHAMMER ROAD
LAKE WORTH, FL 33463 US

FEI Number: 55-0839019

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ISRAEL-GEMMEL, ALISSA
5867 TRIPHAMMER ROAD
LAKE WORTH, FL 33463 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 TREASURER
Name ISRAEL, APRIL
Address 1060 WINCHESTER ROAD NE
City-State-Zip: HUNTSVILLE AL 35811

Title SV
Name ISRAEL, APRIL
Address 1060 WINCHESTER ROAD NE
City-State-Zip: HUNTSVILLE AL 35811

Title P
Name ISRAEL, RICHARD
Address 1060 WINCHESTER ROAD NE
City-State-Zip: HUNTSVILLE AL 35811

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: RICHARD ISRAEL

PRESIDENT

01/25/2023

Electronic Signature of Signing Officer/Director Detail

Date