

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048800

Entity Name: HEALTHSUN HEALTH PLANS, INC.

FILED
Apr 17, 2017
Secretary of State
CC8360070682

Current Principal Place of Business:

3250 MARY STREET
#400
COCONUT GROVE, FL 33133

Current Mailing Address:

3250 MARY STREET
#400
COCONUT GROVE, FL 33133 US

FEI Number: 20-0982649

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLINE, ROBERT M
333 SE 2ND AVENUE
#4500
MIAMI, FL 33131 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: ROBERT M KLINE

04/17/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BLACK, DARREN M
Address 3250 MARY STREET
#400
City-State-Zip: COCONUT GROVE FL 33133

Title DIRECTOR
Name FRANCIS, PETER A
Address 3250 MARY STREET
#400
City-State-Zip: COCONUT GROVE FL 33133

Title DIRECTOR, PRESIDENT, CEO
Name SCHUTZEN, RON
Address 3250 MARY STREET
#400
City-State-Zip: COCONUT GROVE FL 33133

Title CFO
Name LAM, GALE
Address 3250 MARY STREET
#400
City-State-Zip: COCONUT GROVE FL 33133

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: GALE LAM

CFO

04/17/2017

Electronic Signature of Signing Officer/Director Detail

Date