Entity Name: COVENTRY HEALTH CARE NATIONAL ACCOUNTS, INC.

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

509 PROGRESS DRIVE, SUITE 117 SUITE 300 LINTHICUM HEIGHTS, MD 21090

DOCUMENT# F0700001644

Current Mailing Address:

509 PROGRESS DRIVE, SUITE 117 SUITE 300 LINTHICUM HEIGHTS, MD 21090 US

FEI Number: 20-8070994

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATIONE, 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

Officer/Director Detail :

Oncendire	CIOI Delall.		
Title	ASSISTANT TREASURER	Title	ASSISTANT TREASURER
Name	STEPONAITIS, DIANE E.	Name	PARR, MARC A.
Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300	Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300
City-State-Zip:	LINTHICUM HEIGHTS MD 21090	City-State-Zip:	LINTHICUM HEIGHTS MD 21090
Title	ASSISTANT SECRETARY	Title	ASSISTANT SECRETARY
Name	FINCH, DEBORAH E.	Name	ROLWING, THOMAS J.
Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300	Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300
City-State-Zip:	LINTHICUM HEIGHTS MD 21090	City-State-Zip:	LINTHICUM HEIGHTS MD 21090
Title	VP	Title	VICE PRESIDENT AND SECRETARY
Name	WOLLER, SHERI L.	Name	LEE, EDWARD CHUNG-I
Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300	Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300
City-State-Zip:	LINTHICUM HEIGHTS MD 21090	City-State-Zip:	LINTHICUM HEIGHTS MD 21090
Title	ASSISTANT SECRETARY	Title	SENIOR INVESTMENT OFFICER
Name	CIANCI, WENDYANN M.	Name	OADES, PETER R.
Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300	Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300
City-State-Zip:	LINTHICUM HEIGHTS MD 21090	City-State-Zip:	LINTHICUM HEIGHTS MD 21090

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: EDWARD CHUNG-I LEE

SECRETARY

04/23/2024

Electronic Signature of Signing Officer/Director Detail

FILED Apr 23, 2024 Secretary of State 8730603649CC

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	ASSISTANT SECRETARY	Title	ASSISTANT TREASURER
Name	BEAULIEU, SHEELAGH M.	Name	HEALY, ROBERT SEAN
Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300	Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300
City-State-2	Zip: LINTHICUM HEIGHTS MD 21090	City-State-Zip:	LINTHICUM HEIGHTS MD 21090
Title	ASSISTANT TREASURER	Title	VICE PRESIDENT AND TREASURER
Name	CHUEY, LINDSAY A.	Name	SMITH, TRACY LOUISE
Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300	Address	509 PROGRESS DRIVE, SUITE 117 SUITE 300
City-State-	Zip: LINTHICUM HEIGHTS MD 21090	City-State-Zip:	LINTHICUM HEIGHTS MD 21090
Title		Title	ACCICTANT SECRETARY
Title	ASSISTANT VICE PRESIDENT	Title	ASSISTANT SECRETARY
Title Name	ASSISTANT VICE PRESIDENT POMPONI, JENNIFER L.	Title Name	ASSISTANT SECRETARY NOWROOZI, LEILA
Name	POMPONI, JENNIFER L. 509 PROGRESS DRIVE, SUITE 117 SUITE 300	Name	NOWROOZI, LEILA 509 PROGRESS DRIVE, SUITE 117 SUITE 300
Name Address	POMPONI, JENNIFER L. 509 PROGRESS DRIVE, SUITE 117 SUITE 300	Name Address	NOWROOZI, LEILA 509 PROGRESS DRIVE, SUITE 117 SUITE 300
Name Address City-State-	POMPONI, JENNIFER L. 509 PROGRESS DRIVE, SUITE 117 SUITE 300 Zip: LINTHICUM HEIGHTS MD 21090	Name Address City-State-Zip:	NOWROOZI, LEILA 509 PROGRESS DRIVE, SUITE 117 SUITE 300 LINTHICUM HEIGHTS MD 21090
Name Address City-State- Title	POMPONI, JENNIFER L. 509 PROGRESS DRIVE, SUITE 117 SUITE 300 Zip: LINTHICUM HEIGHTS MD 21090 ASSISTANT SECRETARY	Name Address City-State-Zip: Title	NOWROOZI, LEILA 509 PROGRESS DRIVE, SUITE 117 SUITE 300 LINTHICUM HEIGHTS MD 21090 DIRECTOR, PRESIDENT
Name Address City-State-2 Title Name	POMPONI, JENNIFER L. 509 PROGRESS DRIVE, SUITE 117 SUITE 300 Zip: LINTHICUM HEIGHTS MD 21090 ASSISTANT SECRETARY COLE, JOSHUA C 509 PROGRESS DRIVE, SUITE 117 SUITE 300	Name Address City-State-Zip: Title Name	NOWROOZI, LEILA 509 PROGRESS DRIVE, SUITE 117 SUITE 300 LINTHICUM HEIGHTS MD 21090 DIRECTOR, PRESIDENT SANCHEZ, CANDICE 509 PROGRESS DRIVE, SUITE 117 SUITE 300