

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 364687

FILED
Mar 30, 2011
Secretary of State

Entity Name: UNITEDHEALTHCARE OF FLORIDA, INC.

Current Principal Place of Business:

495 NORTH KELLER ROAD
SUITE 200
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

9900 BREN ROAD EAST (MN008-T502)
ATTENTION LEGAL DEPARTMENT
MINNETONKA, MN 55343

New Mailing Address:

495 NORTH KELLER ROAD
SUITE 200
MAITLAND, FL 32751

FEI Number: 59-1293865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D/P
Name: LEWIS, THOMAS DAVID
Address: 495 NORTH KELLER ROAD, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: SEC
Name: MATTHEWS, JOHN JOSEPH
Address: 495 NORTH KELLER ROAD, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: TREA
Name: OBERRENDER, ROBERT WORTH
Address: 495 NORTH KELLER ROAD, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: D/VP
Name: ZAFFIRIS, NICHOLAS J
Address: 495 NORTH KELLER ROAD, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: DIR
Name: CLARKSON, PETER JOHN
Address: 495 NORTH KELLER ROAD, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: DIR
Name: COLE, DANIEL MARTIN
Address: 495 NORTH KELLER ROAD, SUITE 200
City-St-Zip: MAITLAND, FL 32751

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: MANDELIN HENDRICKS

POA

03/30/2011

Electronic Signature of Signing Officer or Director

Date