

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 364687

FILED
Jan 14, 2003
Secretary of State

Entity Name: UNITED HEALTHCARE 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:

495 NORTH KELLER ROAD
SUITE 200
MAITLAND, FL 32751

New Mailing Address:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHULTZ, GARY L
Address: 13621 NW 12TH ST
City-St-Zip: SUNRISE, FL 33323

Title: T () Delete
Name: WEISS, ALLAN J.
Address: UNITEDHEALTH GRP CTR, 9900 BREN RD E
City-St-Zip: MINNETONKA, MN 55343

Title: DEVP () Delete
Name: SHEEHY, ROBERT J
Address: UNITEDHEALTH GRP CTR, 9900 BREN RD E
City-St-Zip: MINNETONKA, MN 55343

Title: DVAT () Delete
Name: MUNSELL, WILLIAM A
Address: UNITEDHEALTH GRP CTR, 9900 BREN RD E
City-St-Zip: MINNETONKA, MN 55343

Title: S () Delete
Name: BEUTNER, BRIAN K
Address: UNITEDHEALTH GRP CTR, 9900 BREN RD E
City-St-Zip: MINNETONKA, MN 55343

Title: VP-T () Delete
Name: FLOTTEMESCH, DIANE L
Address: UNITEDHEALTH GRP CTR, 9900 BREN RD E
City-St-Zip: MINNETONKA, MN 55343

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DAVIES, MATTHEW M
Address: 494 NORTH KELLER ROAD, SUITE 200
City-St-Zip: MAITLAND, FL 32751 US

Title: T (X) Change () Addition
Name: WEISS, ALLAN J.
Address: 9900 BREN ROAD EAST
City-St-Zip: MINNETONKA, MN 55343 US

Title: DEVP (X) Change () Addition
Name: SHEEHY, ROBERT J
Address: 5901 LINCOLN DRIVE
City-St-Zip: EDINA, MN 55436 US

Title: DVAT (X) Change () Addition
Name: MUNSELL, WILLIAM A
Address: 5901 LINCOLN DRIVE
City-St-Zip: EDINA, MN 55436 US

Title: S (X) Change () Addition
Name: PALME-KRIZAK, CHRISTINA R
Address: 5901 LINCOLN DRIVE
City-St-Zip: EDINA, MN 55436 US

Title: VP-T (X) Change () Addition
Name: KELLY, JOHN W
Address: 9900 BREN ROAD EAST
City-St-Zip: MINNETONKA, MN 55343 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHRISTINA R. PALME-KRIZAK

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01/14/2003

Electronic Signature of Signing Officer or Director

Date