2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: BLUE CROSS AND BLUE SHIELD OF FLORIDA, INC.

Current Principal Place of Business:

4800 DEERWOOD CAMPUS PKWY
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 60729
JACKSONVILLE, FL 32236

New Mailing Address:

FEI Number: 59-2015694 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: S
Name: JOSEPH, CHARLES S
Address: 4800 DEERWOOD CAMPUS PKWY 100-8
City-St-Zip: JACKSONVILLE, FL 32246

Title: CP
Name: LUFRANO, ROBERT I M. D.
Address: 4800 DEERWOOD CAMPUS PKWY 100-8
City-St-Zip: JACKSONVILLE, FL 32246

Title: D
Name: BOYKIN, EDWARD L
Address: HC #71 BOX 52
City-St-Zip: CLAYTON, OK 74536

Title: D
Name: BEALL, ROBERT M II
Address: P.O. BOX 9285
City-St-Zip: BRADENTON, FL 34206

Title: T
Name: COATS, WILLIAM A
Address: 4800 DEERWOOD CAMPUS PKWY 100-6
City-St-Zip: JACKSONVILLE, FL 32246

Title: CFO
Name: DOERR, CHRIS R
Address: 4800 DEERWOOD CAMPUS PKWY 100-8
City-St-Zip: JACKSONVILLE, FL 32246

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES S. JOSEPH S 03/07/2011

Electronic Signature of Signing Officer or Director — Date