المتالية الم

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

#### DOCUMENT # J25733

1. Entity Name

FLORIDA HEALTH PLANS, INC.



Principal Place of Business

**4211 W BOY SCOUT BLVD** 

# 750 TAMPA, FL 33607 Mailing Address

4211 W BOY SCOUT BLVD

# 750

TAMPA, FL 33607

### FILED Jan 20, 2005 8:00 am Secretary of State

01-20-2005 90035 049 \*\*\*158.75

50003952



01042005

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2725016

Applied For Not Applicable

5. Certificate of Status Desired

×

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAWRENCE, LEE 4211 W BOY SCOUT BLVD STE 750 TAMPA, FL 33607

# DO NOT WRITE IN THIS SPACE

|   |   |          |               | ·                              |  |  |
|---|---|----------|---------------|--------------------------------|--|--|
| 8. 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. I am familiar with, and accept the obligations of registered agent. |   |          |               |                                |  |  |
| SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE   |   |          |               |                                |  |  |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.   |   |          | cing 🗆        | \$5.00 May Be<br>Added to Fees |  |  |
| 10. OFFICERS AND DIRECTORS  |   |          |               |                                |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | C<br>MEANS, MICHAEL D<br>8249 DEVEREUX DRIVE<br>MELBOURNE, FL 32940       | , 49     |               |                                |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | D<br>HILLENMEYER, JOHN<br>1414 KUHL AVE<br>ORLANDO, FL 32806              | <b>L</b> |               |                                |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | GRADY, BOB<br>4211 W BOY SCOUT BLYD STE 750<br>TAMPA, FL 33607            |          | DO NOT WRITE  |                                |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | PD<br>LAWRENCE, LEE<br>4211 W BOY SCOUT BLVD STE 750<br>TAMPA, FL 33607   |          | IN THIS SPACE |                                |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | TS<br>STEIN, NORMAN V<br>3/00 E FLETCHER AVE UNIV COMM<br>TAMPA, FL 33613 | I HOSP   |               |                                |  |  |
| TITLE NAME STREET ADDRESS CDTY-ST-ZIP   | D<br>FLETHCHER, ALLEN<br>400 E. 10TH STREET<br>ANNISTON, AL 36201         |          |               |                                |  |  |

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

83-350-8300



## **ATTACHMENT**

### Florida Health Plans - Board of Directors - 2004-2005

President

Lee Lawrence

President

VHA Southeast

4211 W. Boy Scout Blvd., Suite 750

Southeast

Tampa, Florida 33607 Phone: (813) 350-8330 FAX: (813) 350-8383

Email: llawrenc@vha.com

Chairman

Michael D. Means President & CEO Health First, Inc.

Rockledge, FL 32955 Phone: (321) 434-5651

Email: mmeans@health-first.org

Director

John Hillenmeyer President & CEO

Orlando Regional Healthcare System

1414 Kuhl Avenue Orlando, Florida 32806 Phone: (407) 841-5203 FAX: (407) 237-6328 Email: johnh@orhs.org

Director Duncan Finlay, MD President & CEO

Sarasota Memorial Hospital 1700 South Tamiami Trail Sarasota, Florida 34239 Phone: (941) 917-9000 FAX: (941) 917-6443

Email: duncan-finlay@smh.com

Director

Allen Fletcher President & CEO

Northeast Alabama Reg. Med. Ctr.

400 E. 10th Street

Email: dkilgore@hvps.com

Director

Al Stubblefield

President & CEO **Baptist Healthcare** 

1717 North "E" Street, Suite 320

Pensacola, FL 32501 Phone: (850) 469-7643 FAX: (850) 434-4841 E-mail: astubble@bhcpns.org Director

Joe Austin

Chief Executive Officer Huntsville Hospital 101 Sivley Road Huntsville, AL 35801 Phone: (256) 265-8123 FAX: (256) 265-2834

E-mail: austin@admin.hhsys.org

Treasurer\Secretary

Vice President

**Bob Grady** Vice President VHA Southeast

Norman V. Stein

President & CEO

Bryan Kindred

President & CEO

Tampa, Florida 33613

Phone: (813) 615-7203

FAX: (813) 615-7580

4211 W. Boy Scout Blvd., Suite 750

University Community Hospital, Inc.

3100 East Fletcher Avenue

Email: bmcleod@mail.uch.org

Tampa, Florida 33607 Phone: (813) 350-8310 FAX: (813) 350-8383 Email: bgrady@vha.com

6450 S. US 1

FAX: (321) 752-4624

Director

DCH Health System 809 University Blvd. East Tuscaloosa, Alabama 35401 Phone: (205) 759-7329

FAX: (205) 750-5204

Email: vrichardson@dchsystem.com

Anniston, Alabama 36201 Phone: (256) 235-5252 FAX: (256) 235-5608