

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000007894

FILED
Oct 24, 2008
Secretary of State

Entity Name: VOLUSIA FLAGLER HEALTH INSURANCE, INC.

Current Principal Place of Business:

1200 W INTERNATIONAL SPEEDWAY BLVD
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

1200 W INTERNATIONAL SPEEDWAY BLVD
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 65-1318563 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BABB, BRIAN
1200 W INTERNATIONAL SPEEDWAY BLVD
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

SPIWAK, RAND
1200 W INTERNATIONAL SPEEDWAY BLVD
DAYTONA BEACH, FL 32120 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: RAND SPIWAK

10/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHARPLES, KENT
Address: 1200 W INTERNATIONAL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: V () Delete
Name: SPIWAK, RAND
Address: 1200 W INTERNATIONAL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: V () Delete
Name: SANDSTROM, LARRY
Address: 1200 W INTERNATIONAL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D () Delete
Name: VANDUSEN, LAURIE
Address: 1200 W INTERNATIONAL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAND S. SPIWAK

DR.

10/24/2008

Electronic Signature of Signing Officer or Director

Date