## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000003117

FILED Jan 11, 2012 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF HEALTH PLANS, INC.

**New Principal Place of Business: Current Principal Place of Business:** 

200 WEST COLLEGE AVE SUITE 104 TALLAHASSEE, FL 32301

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 10748 TALLAHASSEE, FL 32302

FEI Number: 65-0598901 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARNER, MICHAEL W 200 WEST COLLEGE AVE SUITE 104 TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

CEO

GARNER, MICHAEL W Name:

Address: 200 WEST COLLEGE AVE SUITE104

City-St-Zip: TALLAHASSEE, FL 32301

Title: SEC

Name: SPRING, HARRY

Address: 106 E. COLLEGE AVE. SUITE 650

City-St-Zip: TALLAHASSEE, FL 32301

Title: TRE

CHRISTOPHER, CIANO Name: Address: 1340 CONCORD TERRACE City-St-Zip: SUNRISE, FL 33323

Title: CHAI

Name: ENTERLEIN, KEVIN Address: 1600 SW 80TH TERRACE City-St-Zip: PLANTATION, FL 33324

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: MICHAEL GARNER CEO 01/11/2012