## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000103707

Entity Name: WELLCARE OF FLORIDA, INC.

FILED Jul 09, 2002 8:00 AM Secretary of State

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

4047 OKEECHOBEE BLVD., STE. 226 750D SOUTH MILITARY TRAIL WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33415

Current Mailing Address: New Mailing Address:

4047 OKEECHOBEE BLVD., STE. 226 750D SOUTH MILITARY TRAIL WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33415

FEI Number: 65-1020499 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:

HILL, HOWARD

4047 OKEECHOBEE BLVD., STE. 226

WEST PALM BEACH, FL 33409

HILL, HOWARD

750D SOUTH MILITARY TRAIL

WEST PALM BEACH, FL 33415

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: HOWARD HILL 07/09/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: HILL, HOWARD Name: HILL, HOWARD

Address: 4047 OKEECHOBEE BLVD., STE. 226 Address: 750D SOUTH MILITARY TRAIL City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: WEST PALM BEACH, FL 33415

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: HOWARD HILL D 07/09/2002