

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000011465

FILED
Mar 17, 2011
Secretary of State

Entity Name: FLORIDA PREMIER HEALTH PLAN, INC.

Current Principal Place of Business:

316 E. PARK AVE.
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

316 E. PARK AVE.
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 51-0668242 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SHARPE, HAROLD R
316 E. PARK AVE.
TALLAHASSEE, FL 32301 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: CD
Name: CHERRY, JON
Address: 316 E. PARK AVENUE
City-St-Zip: TALLAHASSEE, FL 32301

Title: VD
Name: RONI, STEVE
Address: 4740 N STATE ROAD 7
City-St-Zip: ORLANDO, FL 32822

Title: ST
Name: KASSAB, JERRY
Address: 1800 MERCY DRIVE
City-St-Zip: ORLANDO, FL 32808

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

SIGNATURE: HAROLD R SHARPE

PRES

03/17/2011

Electronic Signature of Signing Officer or Director

Date