

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000005655

FILED
Apr 24, 2012
Secretary of State

Entity Name: HERITAGE HEALTH INSURANCE CORP

Current Principal Place of Business:

3290 11TH AVE SOUTHWEST
NAPLES, FL 34117 US

New Principal Place of Business:

1496 TREDEGAT DRIVE
FORT MYERS, FL 33919 US

Current Mailing Address:

3290 11TH AVE SOUTHWEST
NAPLES, FL 34117 US

New Mailing Address:

1496 TREDEGAT DRIVE
FORT MYERS, FL 33919 US

FEI Number: 27-4586977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VITIELLO, SALVATORE
3290 11TH AVE SOUTHWEST
NAPLES, FL 34117 US

Name and Address of New Registered Agent:

VITIELLO, SALVATORE
1496 TREDEGAT DRIVE
FORT MYERS, FL 33919 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: SALVATORE VITIELLO

04/24/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SEC
Name: CONNOR, HEIDI
Address: 1496 TREDEGAR DR
City-St-Zip: FORT MYERS, FL 33919 US

Title: PRES
Name: VITIELLO, SALVATORE
Address: 1496 TREDEGAR DR
City-St-Zip: FORT MYERS, FL 33919 US

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: SALVATORE VITIELLO

PRES

04/24/2012

Electronic Signature of Signing Officer or Director

Date