2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V12641

Entity Name: AMERIGROUP FLORIDA, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4200 WEST CYPRESS STREET. SUITE 900 TAMPA, FL 33607 **New Mailing Address: Current Mailing Address:** PO BOX 62509 VIRGINIA BEACH, VA 234662509 US FEI Number: 65-0318864 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: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MCHUGH, WILLIAM Name: Name: 4200 WEST CYPRESS STREET, SUITE 900 Address: Address: City-St-Zip: TAMPA, FL 33607 US City-St-Zip: ٧S Title: Title: () Delete () Change () Addition Name: BALDWIN, STANLEY F Name: 4425 CORPORATION LANE 300 Address: Address: VIRGINIA BEACH, VA 23462 US City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition SHIELDS, KAREN SHIELDS, KAREN L Name: Name: 4425 CORPORATION LANE 300 4425 CORPORATION LANE 300 Address: Address: VIRGINIA BEACH, VA 23462 US City-St-Zip: VIRGINIA BEACH, VA 23462 US City-St-Zip: () Delete Title: VT Title: () Change () Addition ANGLIN, SCOTT Name: Name: Address: 4425 CORPORATION LANE 300 Address: City-St-Zip: VIRGINIA BEACH, VA 23462 US City-St-Zip: Title: VD Title: () Delete () Change () Addition GILMORE, DONALD V Name: Name:

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

Address:

City-St-Zip:

SIGNATURE: KAREN L. SHIELDS VP 04/24/2009

420 W CYPRESS ST STE 900

TAMPA, FL 33607 US

Address: City-St-Zip: