2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2018
Secretary of State
CC8721196868

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Entity Name: FLORIDA ASSOCIATION OF HEALTH UNDERWRITERS, INC.

Current Principal Place of Business:

407 CENTERPOINTE CIRCLE
SUITE 1637
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

P.O. BOX 150358
ALTAMONTE SPRINGS, FL 32715-0358 US

FEI Number: 65-0605904

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHERRILL, DAVID M
407 CENTERPOINTE CIRCLE
SUITE 1637
ALTAMONTE SPRINGS, FL 32701 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: DAVID M SHERRILL 02/19/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	EXECUTIVE DIRECTOR
Name	SHERRILL, DAVID M
Address	407 CENTERPOINTE CIRCLE SUITE 1637
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	VP
Name	HEDIGER, DEBBIE R
Address	4907 BOYNTON CT
City-State-Zip:	TAMPA FL 33625

Title	PRESIDENT ELECT
Name	HOFFMAN, ARTHUR
Address	5074 NW 86 WAY
City-State-Zip:	POMPANO BEACH FL 33067

Title	IMM PAST PRESIDENT
Name	KENNETH, STEVENSON
Address	3131 LONNBLADH ROAD
City-State-Zip:	TALLAHASSEE FL 32308-4255

Title	PRESIDENT
Name	ISRAEL, STEVE
Address	4204 MANOR FOREST TRAIL
City-State-Zip:	BOYNTON BEACH FL 33436-8851

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: DAVID M SHERRILL EXECUTIVE DIRECTOR 02/19/2018

Electronic Signature of Signing Officer/Director Detail — Date