## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 364687** 

Entity Name: UNITEDHEALTHCARE OF FLORIDA, INC.

**Current Principal Place of Business:** 

495 NORTH KELLER ROAD, SUITE 200

MAITLAND, FL 32751

**Current Mailing Address:** 

495 NORTH KELLER ROAD, SUITE 200 MAITLAND, FL 32751 US

FEI Number: 59-1293865 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

**FILED** Mar 25, 2019

**Secretary of State** 

3266516841CC

Officer/Director Detail :

Title DIRECTOR Title DIRECTOR

CHOATE, THOMAS CLIFTON Name Name LAWTON, MICHAEL SHERMAN

Address 185 ASYLUM STREET, CITY PLACE I Address 3100 SW 145TH AVENUE

SUITES 100/110/120/200

3100 SW 145TH AVENUE

HARTFORD CT 06103 City-State-Zip: City-State-Zip: MIRAMAR FL 33027

Title DIRECTOR

Title **DIRECTOR** REIDY, GREGORY DAVID Name

Name SCOTT, JULIET TYLER Address 10 CADILLAC DRIVE

Address SUITE 200

SUITES 100/110/120/200 **BRENTWOOD TN 37027** City-State-Zip:

MIRAMAR FL 33027

Title DIRECTOR

City-State-Zip:

Title **PRESIDENT** ZAFFIRIS, NICHOLAS JEFFREY Name

Name REIDY, GREGORY DAVID 3100 SW 145TH AVENUE Address

10 CADILLAC DRIVE Address City-State-Zip: MIRAMAR FL 33027 SUITE 200

City-State-Zip: **BRENTWOOD TN 37027** 

Title TREASURER Title SECRETARY Name GILL, PETER MARSHALL

MURDOCK, SARAH ANN Name Address 9900 BREN ROAD EAST

495 NORTH KELLER ROAD, SUITE 200 Address City-State-Zip: MINNETONKA MN 55343

> City-State-Zip: MAITLAND FL 32751

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.

03/25/2019 SIGNATURE: SARAH ANN MURDOCK SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date