2019 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 29, 2019
Secretary of State
2439087529CC

DOCUMENT# J28248

Entity Name: HUMANA MEDICAL PLAN, INC.

Current Principal Place of Business:

3501 SW 160TH AVENUE
MIRAMAR, FL 33027

Current Mailing Address:

P.O. BOX 740026
ATTN: TAX DEPT
LOUISVILLE, KY 40201-7426

FEI Number: 61-1103898

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Officer/Director Detail :

Title	SENIOR VICE PRESIDENT, TAX
Name	ROBINSON, HANK
Address	500 W MAIN ST.
City-State-Zip:	LOUISVILLE KY 40202

Title	DIRECTOR, PRESIDENT AND CEO
Name	BROUSSARD , BRUCE
Address	500 WEST MAIN ST
City-State-Zip:	LOUISVILLE KY 40202

Title	SEGMENT PRESIDENT, GROUP BUSINESS
Name	HUNTER, CHRISTOPHER H
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	REGIONAL PRESIDENT
Name	GALLOWAY, DEBORAH
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	VICE PRESIDENT AND TREASURER
Name	BAILEY, ALAN
Address	500 W. MAIN ST.
City-State-Zip:	LOUISVILLE KY 40202

Title	DIRECTOR, CFO
Name	KANE, BRIAN A
Address	500 W MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	DIRECTOR, SEGMENT PRESIDENT, RETAIL
Name	WHEATLEY, TIMOTHY ALAN
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	REGIONAL PRESIDENT
Name	VALVERDE, M.D., FERNANDO JOSE
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

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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: C. BROOKS NEWMAN

SENIOR VICE PRESIDENT, DEPUTY GENERAL COUNSEL & CORPORATE SECRETARY

05/29/2019

Officer/Director Detail Continued :

Title	CHIEF INFORMATION OFFICER
Name	LECLAIRE, BRIAN P PHD
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, MEDICAID PRESIDENT
Name	BARGER, III, JOHN E
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	VICE PRESIDENT, INVESTMENTS
Name	PRESTON, WILLIAM MARK
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, MEDICARE EAST & PROVIDER
Name	RENAUDIN, GEORGE II
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, CHIEF ACCOUNTING OFFICER & CONTROLLER
Name	ZIPPERLE, CYNTHIA
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	VICE PRESIDENT
Name	EDWARDS, DOUGLAS
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	REGIONAL PRESIDENT
Name	MOORE, MATTHEW G
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, CHIEF ACTUARY
Name	OLSON, VANESSA M
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, EMPLOYER GROUP AND SPECIALITY
Name	MATZKE, MARK M
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, MEDICARE REGIONAL LEADER
Name	MCCULLEY, STEVEN
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, MEDICARE WEST AND MARKETPOINT
Name	FERNANDEZ, JEFFREY C
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, EMPLOYER GROUP SALES
Name	REMMERS, RICHARD D
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	VICE PRESIDENT
Name	WILSON, RALPH
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, DEPUTY GENERAL COUNSEL & CORPORATE SECRETARY
Name	NEWMAN, C BROOKS
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SEGMENT PRESIDENT, HEALTHCARE SERVICES
Name	FLEMING, WILLIAM K
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	VICE PRESIDENT, CHIEF COMPLIANCE OFFICER
Name	O'REILLY, SEAN J
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	APPOINTED ACTUARY
Name	BESENDORF, ANDREW J
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR VICE PRESIDENT, MEDICARE DIVISIONAL LEADER
Name	STEWART, G ALAN
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Name	VOLLMER, RICHARD A JR
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202
Title	ASSISTANT GENERAL COUNSEL & ASSISTANT CORPORATE SECRETARY
Name	RUSCHELL, JOSEPH M
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	SENIOR LEGAL PROFESSIONAL & ASSISTANT CORPORATE SECRETARY
Name	DURALL, COURTNEY D.
Address	500 WEST MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202