## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000121690

Entity Name: MEDICA HEALTH PLANS OF FLORIDA, INC.

**FILED** Mar 25, 2019 **Secretary of State** 0160681624CC

## **Current Principal Place of Business:**

9100 SOUTH DADELAND BOULEVARD **SUITE 1250** MIAMI, FL 33156

## **Current Mailing Address:**

9100 SOUTH DADELAND BOULEVARD **SUITE 1250** MIAMI, FL 33156 US

FEI Number: 20-3391186 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH 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

Title

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

Name EKLO, BENJAMIN NELSON Name RODRIGUEZ, ROGER

Address 9800 HEALTH CARE LANE Address 9100 SOUTH DADELAND BOULEVARD

City-State-Zip: MINNETONKA MN 55343 City-State-Zip: MIAMI FL 33156

Title DIRECTOR

Name ST. MARTIN, BRIAN HOWARD Name STILLMAN, CRAIG ANDREW Address 9800 HEALTH CARE LANE 9800 HEALTH CARE LANE Address City-State-Zip: MINNETONKA MN 55343

City-State-Zip: MINNETONKA MN 55343

Title DIRECTOR Title **PRESIDENT** 

Name VELASCO, JR, JOSE LUIS RODRIGUEZ, ROGER Name

Address 9100 SOUTH DADELAND BOULEVARD 9100 SOUTH DADELAND BOULEVARD Address

City-State-Zip: MIAMI FL 33156 City-State-Zip: MIAMI FL 33156

Title **TREASURER** Title **SECRETARY** 

Name GILL, PETER MARSHALL Name MURDOCK, SARAH ANN

Address 9900 BREN ROAD EAST 9100 SOUTH DADELAND BOULEVARD Address

**SUITE 1250** City-State-Zip: MINNETONKA MN 55343

DIRECTOR

City-State-Zip: MIAMI FL 33156

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: SARAH ANN MURDOCK

SECRETARY

03/25/2019

Date