2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2016
Secretary of State
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Entity Name: MEDICARE ADVANTAGE AND HEALTH INSURANCE PLANS, INC.

Current Principal Place of Business:

6025 NW 58 PL.
GAINESVILLE, FL 32653

Current Mailing Address:

6025 NW 58 PL.
GAINESVILLE, FL 32653 US

FEI Number: 47-3739045

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAZY, VICTOR JR.
6025 NW 58 PL.
GAINESVILLE, FL 32653 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	P	Title	VP
Name	HAZY, VICTOR JR.	Name	HAZY, CAROL M
Address	6025 NW 58 PL.	Address	6025 NW 58 PL.
City-State-Zip:	GAINESVILLE FL 32653	City-State-Zip:	GAINESVILLE FL 32653
Title	SEC	Title	TREA
Name	HAZY, VICTOR JR.	Name	HAZY, VICTOR JR.
Address	6025 NW 58 PL.	Address	6025 NW 58 PL.
City-State-Zip:	GAINESVILLE FL 32653	City-State-Zip:	GAINESVILLE FL 32653

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: VICTOR HAZY PRES. 04/05/2016

Electronic Signature of Signing Officer/Director Detail — Date