

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000086626

Entity Name: PREFERRED CARE PARTNERS, INC.**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:** 65-0885893**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

Date

Officer/Director Detail :

Title DIRECTOR
Name PRIETO, JENNIFER DENISE
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title CFO
Name HUNTER, ROBERT ALDEN
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title DIRECTOR
Name HUNTER, ROBERT ALDEN
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title SECRETARY
Name MURDOCK, SARAH ANN
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title HEALTH CARE RISK MANAGER*
Name SHOMO, GERI [NMN]
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title TREASURER
Name GILL, PETER MARSHALL
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title DIRECTOR
Name VELASCO, JR., JOSE LUIS
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title ASSISTANT SECRETARY
Name ZUBA, JESSICA LEIGH
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

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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: HEATHER ANASTASIA LANG**ASSISTANT SECRETARY 05/18/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ST. MARTIN, BRIAN HOWARD
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title VP
Name COTTINGTON, NYLE BRENT
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title DIRECTOR
Name RODRIGUEZ, ROGER [NMN]
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title ASSISTANT TREASURER*
Name MCGLINCH, THOMAS SHAUN
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title VP, TAX SERVICES*
Name KELLY, JOHN WILLIAM
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title ASSISTANT SECRETARY
Name LANG, HEATHER ANASTASIA
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title PRESIDENT
Name RODRIGUEZ, ROGER [NMN]
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title CEO
Name RODRIGUEZ, ROGER [NMN]
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156

Title ASSISTANT TREASURER*
Name RUNICE, PAUL TIMOTHY
Address 9100 SOUTH DADELAND BOULEVARD
SUITE 1250
City-State-Zip: MIAMI FL 33156