

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000108819

Entity Name: AETNA BETTER HEALTH OF FLORIDA INC.

Current Principal Place of Business:

261 NORTH UNIVERSITY DRIVE
PLANTATION, FL 33324

Current Mailing Address:

261 NORTH UNIVERSITY DRIVE
PLANTATION, FL 33324 US

FEI Number: 65-0986441

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND
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 VICE PRESIDENT AND TREASURER
Name SMITH, TRACY LOUISE
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title PRESIDENT AND CHIEF EXECUTIVE OFFICER
Name SWEET, JENNIFER A.
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name SWEET, JENNIFER A.
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title CFO
Name NAZWORTH, BRYAN S.
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASST. SECRETARY
Name FINCH, , DEBORAH E.
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title VICE PRESIDENT AND ASSISTANT SECRETARY
Name LEE, EDWARD CHUNG-I
Address 151 FARMINGTON AVENUE RW61
City-State-Zip: HARTFORD CT 06156

Title DIRECTOR
Name NELSON, SONYA KAY
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name NAZWORTH, BRYAN S
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Continues on page 2

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: EDWARD CHUNG-I LEE

ASSISTANT SECRETARY

04/22/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP, SECRETARY
Name CLARK, THORNE WASHBURN
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT CONTROLLER
Name TODISCO (NAZARKO), WHITNEY DOROTHY
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title SENIOR INVESTMENT OFFICER
Name BLUNT, DEREK SCOTT
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT VICE PRESIDENT
Name POMPONI, JENNIFER L
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT TREASURER
Name STEPONAITIS, DIANE E
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT SECRETARY
Name CIANCI, WENDYANN M
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASST. SECRETARY
Name GOULD, , CAITLIN M.
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASST. SECRETARY
Name MONTANO, CYNTHIA A
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASST. SECRETARY
Name RESOR, , MARION A
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title VP, MEDICARE
Name CAMPBELL, CHRISTOPHER ROBERT
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title SENIOR VICE PRESIDENT, CEO OF MEDICARE
Name SHUKLA, ANAND AMIT

Title ASSISTANT CONTROLLER
Name KELLER, PETER
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT CONTROLLER
Name THOMPSON, BRADLEY ANDREW
Address 261 NORTH UNIVERSITY DRIVE
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Title CORPORATE CONTROLLER
Name CONTE, STEVEN MATTHEW
Address 261 NORTH UNIVERSITY DRIVE
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Title ASSISTANT TREASURER
Name PARR, MARC A
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT SECRETARY
Name BEAULIEU, SHEELAGH M
Address 261 NORTH UNIVERSITY DRIVE
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Title ASSISTANT SECRETARY
Name COLE, JOSHUA C
Address 261 NORTH UNIVERSITY DRIVE
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Title ASST. SECRETARY
Name KOVACH, KATHRYN L.
Address 261 NORTH UNIVERSITY DRIVE
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Title ASST. SECRETARY
Name NOWROOZI, LEILA
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASST. SECRETARY
Name ROLWING., THOMAS J
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title VP, CFO OF MEDICARE
Name GROZIO, , KEVIN J.
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Address 261 NORTH UNIVERSITY DRIVE

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