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IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT,
IN AND FOR LEON COUNTY, FLORIDA

In re: THE RECEIVERSHIP of
UNIVERSAL HEALTH CARE INSURANCE COMPANY, INC., a Florida corporation,
_____/

CASE NO.: 2013-CA 00358

THE FLORIDA DEPARTMENT OF FINANCIAL SERVICES' MOTION FOR ORDER APPROVING FIFTH FINAL CLAIMS REPORT, FIFTH DISTRIBUTION REPORT, DISTRIBUTION ACCOUNTING STATEMENT, AND AUTHORIZING FIFTH DISTRIBUTION

The Florida Department of Financial Services, Division of Rehabilitation and Liquidation, as Receiver for Universal Health Care Insurance Company, Inc. ("UHCIC"), by and through undersigned counsel, hereby files this *Motion for Order Approving Fifth Final Claims Report, Fifth Distribution Report, Distribution Accounting Statement and Authorizing Fifth Distribution* and as good grounds therefor states the following:

1. On March 22, 2013, this Court entered an *Order Appointing the Florida Department of Financial Services as Receiver for Purposes of Immediate Rehabilitation and Liquidation Effective April 1, 2013*, of UHCIC ("Liquidation Order").

2. Pursuant to section 631.021(1), (6), Florida Statutes, this Court has jurisdiction over the UHCIC receivership, has exclusive jurisdiction over all assets and property of UHCIC, and is authorized to enter all necessary and/or proper orders to carry out the purpose of the Florida Insurers Rehabilitation and Liquidation Act, sections 631.001 *et seq*., Florida Statutes.

3. Pursuant to section 631.182, Florida Statutes, the Department has evaluated and reported all filed claims with the Court specifying the recommended actions to be taken on the claims.

4. **First Interim Claims Report**: On June 22, 2016, this Court entered the *Amended Order Approving the Department's First Interim Claims Report and Recommendation on Claims* ("First ICR"), which addressed 2 secured claims and 6,762 non-guaranty association claims in

Classes 2, 4, 5, 6, 7 and 8.

5. **Second Interim Claims Report:** On May 24, 2018, the Court entered an *Order Approving Department's Second Interim Claims Report and Recommendation on Claims* ("Second ICR"), which addressed 1,121 claims in Classes 2, 6, 8, 9 and 11.

6. **Third Interim Claims Report:** On September 6, 2018, the Court entered an *Order Approving Department's Third Interim Claims Report and Recommendation on Claims* ("Third ICR"), which addressed 4 claims: 1 non-guaranty association Class 8 claim, 2 guaranty association Class 1 claims, and 1 guaranty association Class 2 claim.

7. **Fourth Interim Claims Report:** On January 9, 2019, the Court entered an *Order Approving Department's Fourth Interim Claims Report and Recommendation on Claims* ("Fourth ICR"), which addressed 1 non-guaranty association Class 11 claim and 1 guaranty association Class 1 claim.

8. **Fifth Interim Claims Report:** On April 16, 2024, the Court entered an *Order Approving Department's Fifth Interim Claims Report and Recommendation on Claims* ("Fifth ICR") which addressed 3,277 Class 10 non-guaranty association claims and 2 Class 10 guaranty association claims. These claims represent interest on all of the previously allowed claims in Classes 1-9.

9. Pursuant to section 631.271, Florida Statutes, and starting with Class 1 claims, the Department is required to pay all claims in each class in full or reserve funds to pay them in full before paying claims in the next class.

10. **First Distribution**: On June 25, 2018, the Department sought approval for, and the Court granted, the Department's First Final Claims Report and its application to make a distribution on many of the claims evaluated and reported in the First ICR. The Department made

a distribution of approximately $24,819,538.42 for two secured claims as well as over 3,000 claims in Classes 2, 4, 5, 6, 7 and 8. This distribution represented a 100% of the amount recommended for these claims.

11. **Second Distribution**: On January 3, 2019, the Department sought approval for, and the Court granted, the Department's Second Final Claims Report and its application to make a distribution on claims that were evaluated and whose objections were resolved as of the date of the filing of the application. The Department made a distribution of approximately $2,764,388.04 for 128 claims in Classes 2 and 8. This distribution represented a 100% of the amount recommended on these claims.

12. **Third Distribution:** On February 17, 2021, the Department sought approval for, and the Court granted, the Department's Third Final Claims Report and its application to make a third distribution on claims that were evaluated and whose objections were resolved as of the date of the filing of the application. The Department made a distribution of approximately $18,563,455.17 for 4 claims in Classes 1, 2, and 9. This distribution represented a 100% of the amount recommended on these claims.

13. **Fourth Distribution**: On February 10, 2022, the Department sought approval for, and the Court granted, the Department's Fourth Final Claims Report and its application to make a fourth distribution on claims that were evaluated and whose objections were resolved as of the date of the filing of the application. The Department made a distribution of approximately $139,344.04 for 1 Class 2 claim. This distribution represented a 100% of the amount recommended on these claims.

14. The Department has compiled a Fifth Final Claims Report dated July 31, 2025, which reflects the classification of all filed claims by priority in accordance with section 631.271,

and the claims filing deadline. This report also incorporates the resolution of all timely filed objections and claimant information updates. For the Court's convenience, a summary reflecting the totals from the Fifth Final Claims Report is attached hereto and incorporated herein by reference as **Exhibit A.** The entire Report totaling 1598 pages is available to the court upon request.

15. The Fifth Final Claims Report is broken down into two sections: **Part A** of the Report consists of all non-guaranty association claims, and **Part B** consists of all guaranty association claims. **Part A** of the report reflects that 11,163 non-guaranty association claims were filed in the UHCIC receivership with an aggregate claim amount of $307,661,154.53, of which the total amount recommended by the Department is $77,803,814.70. **Part B** of the report reflects that 6 guaranty association claims were filed in the UHCIC receivership with an aggregate claim amount of $8,869,315.69, of which the total amount recommended by the Department is $10,150,543.25.

16. With the approval of the Department's Fifth Final Claims Report, the Department will be in the position to make a fifth and final distribution of receivership assets. Said assets will be distributed for 3,282 claims in Classes 10 and 11, in accordance with the Fifth Claims Distribution Report dated August 1, 2025. For the Court's convenience, a summary reflecting the totals from the Fifth Claims Distribution Report is attached hereto and incorporated herein by reference as **Exhibit B.** The entire Report totaling 470 pages is available to the court upon request.

17. The Department has compiled a Distribution Accounting Statement—*Projected for a November 2025 Distribution*, (the "*Distribution Accounting*"). As shown in the *Distribution Accounting*, the Department is prepared to make a distribution of $16,555,685.68 for Class 10 claims, which constitutes 100% of the amount recommended on those claims. The Department is

also prepared to make a distribution of $7,123,211.48[1] for Class 11 claims, which constitutes 43.09% of the amount recommended on those claims. The final pro-rata calculation and the amount distributed may have a slight variance due to rounding at the time of check processing. The *Distribution Accounting* is attached hereto and incorporated herein by reference as **Exhibit C**.

18. The Department recommends that the Fifth Final Claims Report, Fifth Claims Distribution Report, and Distribution Accounting be approved.

19. Upon the filing of this Motion for Order Authorizing Distribution, no further assignment of claim shall be accepted by the Department.

20. In an ongoing effort to maintain accuracy and efficiency, the Department proactively works to update its records to reflect change of address information for interested parties (e.g. agents, claimants, creditors, policyholders, subscribers) before mailing notifications and distribution checks. The Department has access to databases and other publicly available information that provides updated address information. The Department requests the authority to search for change of address information when applicable and to use the change of address information for future mailings without further direction of this Court.

21. Despite its best efforts, the Department is not always able to distribute funds to every claimant when funds are ready for distribution due to either bad addresses or W-9 issues. The Department recommends that the unclaimed funds be transferred to the unclaimed property unit(s) of the state(s) reflected in the claimants' last address of record in the Department's files.

[1] The chapter 11 bankruptcy trustee for Universal Health Care, Inc. ("UHCG"), the parent corporation of UHCIC, filed a Class 11 shareholder claim in the receivership. The Class 11 claim was reported and approved by this Court on the Department's Second ICR. Pursuant to a bankruptcy court-approved settlement agreement between UHCG and its creditor, BankUnited, N.A., the parties agreed to split any shareholder distribution from the Department as follows: 25% to UHCG and 75% to BankUnited N.A. UHCG and BankUnited requested that the Department effectuate the split at the time of distribution, and the Class 11 claim was split to honor this request.

WHEREFORE, the Department moves this Honorable Court for entry of an Order:

A. Granting the Department's Motion;

B. Approving and adopting the Department's Fifth Final Claims Report, the Fifth Claims Distribution Report, and Distribution Accounting Statement;

C. Directing the Department to make the above-referenced distribution as indicated in the Distribution Accounting;

D. Directing the Department not to recognize or accept further assignment of claims;

E. Authorizing the Department to update its records to incorporate change of address information for an interested individual/entity (e.g. agent, claimant, creditor, policyholder, subscriber) if the Department determines that there has been a change of address for an interested individual/entity and authorizing the Department to use the change of address information for future mailings; and

F. Authorizing the Department to transfer unclaimed funds to the unclaimed property unit(s) of the state(s) reflected in the claimants' last address of record in the Department's files.

Respectfully Submitted on this the 21st day of August 2025.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on August 21, 2025, a complete and accurate copy of the foregoing document was filed with the Clerk of Courts using the Florida Courts e-filing portal and was served on all email addresses listed in the portal for service in this matter.

/s/ Jamila G. Gooden
Jamila G. Gooden, Senior Attorney
Florida Bar No. 46740
Jamila.Gooden@myfloridacfo.com
Florida Department of Financial Services
Division of Rehabilitation and Liquidation
325 John Knox Road, the Atrium, Suite 101
Tallahassee, FL 32303
Telephone: (850) 413-4414

Exhibit A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES -DIVISION OF REHABILITATION AND LIQUIDATION
UNIVERSAL HEALTH CARE INSURANCE COMPANY, INC.
FINAL CLAIMS REPORT
PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

SUMMARY TOTALS

TOTAL AMOUNT CLAIMED BY NON GUARANTY ASSOCIATION CLAIMANTS	$307,661,154.53
TOTAL AMOUNT RECOMMENDED TO NON GUARANTY ASSOCIATION CLAIMANTS	$77,803,814.70
TOTAL NUMBER	11,163

Secured Claims

COUNT OF SECURED CLAIMS :	2
AMOUNT CLAIMED FOR SECURED CLAIMS BY NON GUARANTY ASSOCIATION	$8,311.41
AMOUNT RECMD FOR SECURED CLAIMS TO NON GUARANTY ASSOCIATION	$17,399.11

UnSecured Claims

COUNT OF CLASS 1 CLAIMS :	0	COUNT OF CLASS 7 CLAIMS :	3
AMOUNT CLAIMED FOR CLASS 1 CLAIMS BY NON GUARANTY ASSOCIATION	$0.00	AMOUNT CLAIMED FOR CLASS 7 CLAIMS BY NON GUARANTY ASSOCIATION	$46,744.57
AMOUNT RECMD FOR CLASS 1 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS :		AMOUNT RECMD FOR CLASS 7 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	$46,744.57
COUNT OF CLASS 2 CLAIMS :	6,387	COUNT OF CLASS 8 CLAIMS :	1,384
AMOUNT CLAIMED FOR CLASS 2 CLAIMS BY NON GUARANTY ASSOCIATION	$213,665,297.36	AMOUNT CLAIMED FOR CLASS 8 CLAIMS BY NON GUARANTY ASSOCIATION	$30,965,480.52
AMOUNT RECMD FOR CLASS 2 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	$20,705,170.55	AMOUNT RECMD FOR CLASS 8 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	$3,658,746.28
COUNT OF CLASS 3 CLAIMS :	0	COUNT OF CLASS 9 CLAIMS :	1
AMOUNT CLAIMED FOR CLASS 3 CLAIMS BY NON GUARANTY ASSOCIATION	$0.00	AMOUNT CLAIMED FOR CLASS 9 CLAIMS BY NON GUARANTY ASSOCIATION	$18,549,102.00
AMOUNT RECMD FOR CLASS 3 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:		AMOUNT RECMD FOR CLASS 9 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	$18,350,309.00
COUNT OF CLASS 4 CLAIMS :	1	CLASS 10 INTEREST CLAIMS (SEE NOTE):	3,277
AMOUNT CLAIMED FOR CLASS 4 CLAIMS BY NON GUARANTY ASSOCIATION	$1.00	AMOUNT CLAIMED FOR CLASS 10 CLAIMS BY NON GUARANTY	$3,277.00
AMOUNT RECMD FOR CLASS 4 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:		AMOUNT RECMD FOR CLASS 10 CLAIMS TO NON GUARANTY	$14,987,358.43
COUNT OF CLASS 5 CLAIMS :	8	COUNT OF CLASS 11 CLAIMS :	32
AMOUNT CLAIMED FOR CLASS 5 CLAIMS BY NON GUARANTY ASSOCIATION	$3,374,001.00	AMOUNT CLAIMED FOR CLASS 11 CLAIMS TO NON GUARANTY ASSOCIATION	$38,506,021.00
AMOUNT RECMD FOR CLASS 5 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	$841,000.00	AMOUNT RECMD FOR CLASS 11 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS	$16,529,730.00
COUNT OF CLASS 6 CLAIMS :	68		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS BY NON GUARANTY ASSOCIATION	$2,542,918.67		
AMOUNT RECMD FOR CLASS 6 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS :	$2,667,356.76		

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

FLORIDA DEPARTMENT OF FINANCIAL SERVICES -DIVISION OF REHABILITATION AND LIQUIDATION
UNIVERSAL HEALTH CARE INSURANCE COMPANY, INC.
FINAL CLAIMS REPORT
PART B - FOR GUARANTY ASSOCIATION CLAIMANTS

SUMMARY TOTALS

TOTAL AMOUNT CLAIMED BY GUARANTY ASSOCIATION	$8,869,315.69
TOTAL AMOUNT RECOMMENDED TO GUARANTY ASSOCIATION CLAIMANTS	$10,150,543.25
TOTAL NUMBER	6

COUNT OF CLASS 1 CLAIMS :	3	COUNT OF CLASS 7 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 1 CLAIMS BY GUARANTY ASSOCIATION :	$2,386,140.69	AMOUNT CLAIMED FOR CLASS 7 CLAIMS BY GUARANTY ASSOCIATION :	$0.00
AMOUNT RECMD FOR CLASS 1 CLAIMS TO GUARANTY ASSOCIATION :	$2,099,043.00	AMOUNT RECMD FOR CLASS 7 CLAIMS TO GUARANTY ASSOCIATION :	
COUNT OF CLASS 2 CLAIMS :	1	COUNT OF CLASS 8 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 2 CLAIMS BY GUARANTY ASSOCIATION :	$6,483,173.00	AMOUNT CLAIMED FOR CLASS 8 CLAIMS BY GUARANTY ASSOCIATION :	$0.00
AMOUNT RECMD FOR CLASS 2 CLAIMS TO GUARANTY ASSOCIATION :	$6,483,173.00	AMOUNT RECMD FOR CLASS 8 CLAIMS TO GUARANTY ASSOCIATION :	
COUNT OF CLASS 3 CLAIMS :	0	COUNT OF CLASS 9 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 3 CLAIMS BY GUARANTY ASSOCIATION :	$0.00	AMOUNT CLAIMED FOR CLASS 9 CLAIMS BY GUARANTY ASSOCIATION :	$0.00
AMOUNT RECMD FOR CLASS 3 CLAIMS TO GUARANTY ASSOCIATION :		AMOUNT RECMD FOR CLASS 9 CLAIMS TO GUARANTY ASSOCIATION :	
COUNT OF CLASS 4 CLAIMS :	0	CLASS 10 INTEREST CLAIMS (SEE NOTE):	2
AMOUNT CLAIMED FOR CLASS 4 CLAIMS BY GUARANTY ASSOCIATION :	$0.00	AMOUNT CLAIMED FOR CLASS 10 CLAIMS BY NON GUARANTY	$2.00
AMOUNT RECMD FOR CLASS 4 CLAIMS TO GUARANTY ASSOCIATION :		AMOUNT RECMD FOR CLASS 10 CLAIMS TO NON GUARANTY	$1,568,327.25
COUNT OF CLASS 5 CLAIMS :	0	COUNT OF CLASS 11 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 5 CLAIMS BY GUARANTY ASSOCIATION :	$0.00	AMOUNT CLAIMED FOR CLASS 11 CLAIMS TO GUARANTY ASSOCIATION CLAIMANTS:	$0.00
AMOUNT RECMD FOR CLASS 5 CLAIMS TO GUARANTY ASSOCIATION :		AMOUNT RECMD FOR CLASS 11 CLAIMS TO GUARANTY ASSOCIATION CLAIMANTS :	
COUNT OF CLASS 6 CLAIMS :	0		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS BY GUARANTY ASSOCIATION :	$0.00		
AMOUNT RECMD FOR CLASS 6 CLAIMS TO GUARANTY ASSOCIATION :			

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

Exhibit B

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION
UNIVERSAL HEALTH CARE INSURANCE COMPANY, INC.
CLAIMS DISTRIBUTION REPORT

SUMMARY TOTALS

TOTAL AMOUNT CLAIMED	$16,533,010.00
TOTAL AMOUNT RECOMMENDED	$33,085,415.68
TOTAL NUMBER	3,282

Secured Claims

COUNT OF SECURED CLAIMS :	0
AMOUNT CLAIMED FOR SECURED CLAIMS :	
AMOUNT RECOMMENDED FOR SECURED CLAIMS :	

Unsecured Claims

COUNT OF CLASS 1 CLAIMS :	0	COUNT OF CLASS 7 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 1 CLAIMS :		AMOUNT CLAIMED FOR CLASS 7 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 1 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 7 CLAIMS :	
COUNT OF CLASS 2 CLAIMS :	0	COUNT OF CLASS 8 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 2 CLAIMS :		AMOUNT CLAIMED FOR CLASS 8 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 2 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 8 CLAIMS :	
COUNT OF CLASS 3 CLAIMS :	0	COUNT OF CLASS 9 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 3 CLAIMS :		AMOUNT CLAIMED FOR CLASS 9 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 3 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 9 CLAIMS :	
COUNT OF CLASS 4 CLAIMS :	0	CLASS 10 INTEREST CLAIMS (SEE NOTE):	3,279
AMOUNT CLAIMED FOR CLASS 4 CLAIMS :		AMOUNT CLAIMED FOR CLASS 10 CLAIMS:	$3,279.00
AMOUNT RECOMMENDED FOR CLASS 4 CLAIMS :		AMOUNT RECMD FOR CLASS 10 CLAIMS:	$16,555,685.68
COUNT OF CLASS 5 CLAIMS :	0	COUNT OF CLASS 11 CLAIMS :	3
AMOUNT CLAIMED FOR CLASS 5 CLAIMS :		AMOUNT CLAIMED FOR CLASS 11 CLAIMS :	$16,529,731.00
AMOUNT RECOMMENDED FOR CLASS 5 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 11 CLAIMS :	$16,529,730.00
COUNT OF CLASS 6 CLAIMS :	0		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS :			
AMOUNT RECOMMENDED FOR CLASS 6 CLAIMS :			

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

Exhibit C

Universal Health Care Insurance Company
Distribution Accounting - 5th
Projected for November 2025 Distribution

ESTIMATED ASSETS AT October 31, 2025

	Value	Reference
Cash	$ 24,373,457.53	Schedule A
Total Assets	**$ 24,373,457.53**	

ESTIMATED FUNDS RETAINAGE

	Value	Reference
Class I - Administrative Claims		
Retainage for Receiver Expenses		
Estimate (November 2025 - April 2026)	6,730.92	Schedule B
Discharge Expenses		
State Contributed Equity, Tax Returns &		
Unclaimed Propery Filings & Labor	687,829.45	Schedule E
Total Proposed Retainage	**694,560.37**	
TOTAL AVAILABLE TO DISTRIBUTE	**$ 23,678,897.16**	

DISTRIBUTION RECOMMENDATION

	Claims Values	Less Previous Claims Distributions	Value of Claims Outstanding	Apply Adv. Pmts. to Guaranty Assoc.	Recommended Distribution	% Value of Claims Outstanding	Total % of Claims Value Distributed
Secured Claims	$ 17,399.11	$ 17,399.11	$ -	$ -	$ -	0.0000%	100.0000%
Class I - Administrative Claims-Guaranty Funds	2,099,043.00	-	2,099,043.00	2,099,043.00	-	0.0000%	100.0000%
Class II - Loss Claims-Guaranty Funds	6,483,173.00	-	6,483,173.00	6,483,173.00	-	0.0000%	100.0000%
Class II - Loss Claims-Other	20,705,170.15	20,705,170.15	-		-	0.0000%	100.0000%
Class III - Return Premium Claims-Guaranty Funds	-	-	-		-	0.0000%	0.0000%
Class III - Return Premium Claims-Other	-	-	-		-	0.0000%	0.0000%
Class IV - Federal Government Claims	-	-	-		-	0.0000%	0.0000%
Class V - Employee Claims	841,000.00	841,000.00	-		-	0.0000%	100.0000%
Class VI - General Creditors Claims GA	-	-	-		-	0.0000%	0.0000%
Class VI - General Creditors Claims Other	2,667,356.76	2,667,356.76	-			0.0000%	100.0000%
Class VII - State & Local Government Claims	46,744.57	46,744.57	-		-	0.0000%	100.0000%
Class VIII - Late Filed Claims	3,658,746.28	3,658,746.28	-		-	0.0000%	100.0000%
Class IX - Surplus/Other-GA	-	-	-		-	0.0000%	0.0000%
Class IX - Surplus/Other Claims	18,350,309.00	18,350,309.00	-		-	0.0000%	100.0000%
Class X - Interest Claims	16,555,685.68	-	16,555,685.68		16,555,685.68	100.0000%	100.0000%
Class XI - Shareholder Claims	16,529,730.00	-	16,529,730.00		7,123,211.48	43.0933%	43.0933%
Totals	**$ 87,954,357.55**	**$ 46,269,326.76**	**$ 41,667,631.68**	**$ 8,582,216.00**	**$ 23,678,897.16**		

Index to Attached Schedules:

Schedule A - Available Cash Projection
Schedule B - Estimated Funds to be Retained by the Receiver for Discharge of the Estate
Schedule C - Allocated State Funds Expensed
Schedule D - Interest Earnings Projection - Pooled Cash
Schedule E - Receiver Discharge Expenses
Schedule F - Contributed Equity

Universal Health Care Insurance Company
Available Cash Projection
Projected for November 2025 Distribution

	Cash Balance as May 31, 2025	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25
Beginning Pooled Cash Balance		$ 24,117,129.24	$ 24,174,246.81	$ 24,223,816.99	$ 24,273,547.17	$ 24,323,427.35
Direct Receiver Expenses (Actual or Estimated)						
Rent-Records, Bank Fees, Postage		7,681.82	7,681.82	7,681.82	7,681.82	7,681.82
Sub-total		**7,681.82**	**7,681.82**	**7,681.82**	**7,681.82**	**7,681.82**
Allocated Receiver Expenses (Estimated)						
Labor & Benefits		6,244.00	12,488.00	12,488.00	12,488.00	12,488.00
Indirect Expenses		2,700.00	2,700.00	2,700.00	2,700.00	2,700.00
Sub-total		**8,944.00**	**15,188.00**	**15,188.00**	**15,188.00**	**15,188.00**
Cash Balance Before Interest Earnings		**24,100,503.42**	**24,151,376.99**	**24,200,947.17**	**24,250,677.35**	**24,300,557.53**
Interest Earnings						
Pooled Cash:						
Actual SPIA Earnings for May to be credited on 06/01/2025		73,743.39				
Estimate based on assumed SPIA APR on the previous month's average Pooled Cash balance (See Schedule D)			72,440.00	72,600.00	72,750.00	72,900.00
Ending Pooled Cash Balance	$ 24,117,129.24	$ 24,174,246.81	$ 24,223,816.99	$ 24,273,547.17	$ 24,323,427.35	$ 24,373,457.53

Assumptions for Allocated Receiver Expenses:

[1] Labor & Benefits: This estimate is based on a four month actual average. Doubled for increased activity leading up to distribution.

February Actual	3,257.29
March Actual	1,628.95
April Actual	6,248.82
May Actual	1,351.14
Sub-total	12,486.20
4 mth. actual average (rounded)	3,122.00
Doubled for increased activity level	$ 6,244.00

[2] Indirect Expenses: This estimate is UHCIC's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on UHCIC's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

Estimated Total Asset %	2.00%
Estimated Total for the Receiver	$ 135,000.00
Estimated Expense (rounded)	$ 2,700.00

Universal Health Care Insurance Company

Estimated Funds to be Retained by the Receiver for Discharge of the Estate
Estimated from November 2025 through the Projected Discharge Date of April 2026

	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26		Retainage Calculation
Beginning Cash Balance		$ 24,373,457.53	$ 744,740.55	$ 759,550.73	$ 738,940.91	$ 717,741.09	$ 702,785.27		
Direct Receiver Expenses									
Records Storage, Bank Fees, Postage		7,681.82	7,681.82	7,681.82	7,681.82	7,681.82	7,681.82		
Sub-total		**7,681.82**	**7,681.82**	**7,681.82**	**7,681.82**	**7,681.82**	**7,681.82**		**$ 46,090.92**
Allocated Receiver Expenses									
Labor & Benefits		12,488.00	12,488.00	12,488.00	12,488.00	6,244.00	6,244.00	[1]	
Indirect Expenses		2,700.00	2,700.00	2,700.00	2,700.00	2,700.00	2,700.00	[2]	
Sub-total		**15,188.00**	**15,188.00**	**15,188.00**	**15,188.00**	**8,944.00**	**8,944.00**		**$ 78,640.00**
Claims Distribution (Approx.)		**23,678,897.16**							
Cash Balance Before Interest Earnings		**671,690.55**	**721,870.73**	**736,680.91**	**716,071.09**	**701,115.27**	**686,159.45**		
Interest Earnings									
Estimate based on assumed SPIA APR on the previous month's average Pooled Cash balance (See Schedule D).		73,050.00	37,680.00	2,260.00	1,670.00	1,670.00	1,670.00		**$ 118,000.00**
Projected Ending Cash Balance	**$ 24,373,457.53**	**$ 744,740.55**	**$ 759,550.73**	**$ 738,940.91**	**$ 717,741.09**	**$ 702,785.27**	**$ 687,829.45**		
Retainage for Receiver's Expenses									**$ 6,730.92**

Assumptions for Allocated Receiver Expenses:

[1] Labor & Benefits: This estimate is based on a four month actual average doubled for continued higher level of activity for this and future distributions.

February Actual	3,257.29
March Actual	1,628.95
April Actual	6,248.82
May Actual	1,351.14
Sub-total	12,486.20
4 mth. actual average (rounded)	$ 3,122.00
Doubled for increased activity level	$ 6,244.00

[2] Indirect Expenses: This estimate is UHCICs estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on UHCICs estimated total assets divided by the Receiver's estimated total assets for all receiverships.

Estimated Total Asset %	2.00%
Estimated Total for the Receiver	$ 135,000.00
Estimated Expense (rounded)	$ 2,700.00

Universal Health Care Insurance Company

Allocated State Funds Expensed

Estimated from June 2025 through the Projected Discharge Date of April 2026

THIS STATEMENT INCLUDED FOR INFORMATION PURPOSES ONLY - AMOUNTS NOT PART OF DISTRIBUTION CALCULATION

	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	January - April 2026	Totals
Accrued Allocated State of Florida Expenses (Estimated)									
Labor & Benefits	$ 240.00	$ 240.00	$ 240.00	$ 240.00	$ 120.00	$ 120.00	$ 120.00	$ 480.00 [1]	$ 1,800.00
Indirect Expenses	860.00	860.00	860.00	860.00	860.00	860.00	860.00	3,440.00 [2]	$ 9,460.00
Total	**$ 1,100.00**	**$ 1,100.00**	**$ 1,100.00**	**$ 1,100.00**	**$ 980.00**	**$ 980.00**	**$ 980.00**	**$ 3,920.00**	$ 11,260.00 [3]

Assumptions for Allocated State of Florida Expenses:

[1] Labor & Benefits: This estimate is based on a four month actual average doubled for continued higher level of activity for this and future distributions.

February Actual	130.30
March Actual	60.50
April Actual	252.40
May Actual	54.84
Sub-total	498.04
4 mth. actual average (rounded)	$ 120.00
Doubled for increased distribution activity	$ 240.00

[2] Indirect Expenses: This estimate is UHCIC's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on UHCIC's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

	Before Distribution
Estimated Total Asset %	2.00%
Estimated Total for the State	$ 43,000.00
Estimated Expense (rounded)	$ 860.00

[3] **Per current Receiver policies and procedures, these accumulated amounts are recorded directly against estate equity as opposed to a liability account.**

Universal Health Care Insurance Company

Interest Earnings Projection - Pooled Cash
Projected for November 2025 Distribution

Schedule D

Interest accrued for May 2025		
Beginning cash balance		24,043,613.48
Ending cash balance		24,117,129.24
Average cash balance		24,080,371.36
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		866,893.37
Accrual for May	**$**	**73,743.39**
Interest accrued for June 2025		
Beginning cash balance		24,117,129.24
Ending cash balance		24,174,246.81
Average cash balance		24,145,688.03
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		869,244.77
Accrual for June	**$**	**72,440.00**
Interest accrued for July 2025		
Beginning cash balance		24,174,246.81
Ending cash balance		24,223,816.99
Average cash balance		24,199,031.90
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		871,165.15
Accrual for July	**$**	**72,600.00**
Interest accrued for August 2025		
Beginning cash balance		24,223,816.99
Ending cash balance		24,273,547.17
Average cash balance		24,248,682.08
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		872,952.55
Accrual for August	**$**	**72,750.00**
Interest accrued for September 2025		
Beginning cash balance		24,273,547.17
Ending cash balance		24,323,427.35
Average cash balance		24,298,487.26
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		874,745.54
Accrual for September	**$**	**72,900.00**

Interest accrued for October 2025		
Beginning cash balance		24,323,427.35
Ending cash balance		24,373,457.53
Average cash balance		24,348,442.44
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		876,543.93
Accrual for October	**$**	**73,050.00**
Interest accrued for November 2025		
Beginning cash balance		24,373,457.53
Ending cash balance		744,740.55
Average cash balance		12,559,099.04
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		452,127.57
Accrual for November	**$**	**37,680.00**
Interest accrued for December 2025		
Beginning cash balance		744,740.55
Ending cash balance		759,550.73
Average cash balance		752,145.64
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		27,077.24
Accrual for December	**$**	**2,260.00**
Interest accrued for January - April 2026		
Beginning cash balance		759,550.73
Ending cash balance		687,829.45
Average cash balance		723,690.09
Assumed SPIA interest rate (Annualized)		3.60%
Subtotal (Annualized)		26,052.84
Accrual for January - April 2026	**$**	**8,680.00**

Universal Health Care Insurance Company
Receiver Discharge Expenses
Projected for November 2025 Distribution

Discharge Expenses (Projected for Post 4/30/2026)		
State Contributed Equity		
Unclaimed Property Scanning and Filing Holders Reports		
2025 - 2026 Tax Returns		687,829.45
Total	**$**	**687,829.45**

Universal Health Care Insurance Company

Statement of Contributed Equity from Regulatory Trust Fund Estimated Balances
Projected for Discharge by 4/30/2026

Contributed Equity Balance as of 05/31/2025		$ 676,829.45
Accrual for June 2025 - April 2026 (Estimate from Schedule C)	$ 11,260.00	
Total		$ 11,260.00
Projected Contributed Equity Balance as of 04/30/2026		**$ 688,089.45**