

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90062 004 ***158.75



DOCUMENT # F02000003703

1. Entity Name
AMERIGROUP CORPORATION

Principal Place of Business
**4425 CORPORATION LANE
 VIRGINIA BEACH, VA 23462**

Mailing Address
**4425 CORPORATION LANE
 VIRGINIA BEACH, VA 23462**



01212004 Chg-P CR2E034 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

54-1739323

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: PCEO
 NAME: MCWATERS, JEFFREY L Delete
 STREET ADDRESS: 4425 CORPORATION LANE, #300
 CITY-ST-ZIP: VIRGINIA BEACH, VA 23462

TITLE: D
 NAME: FERRER, CARLOS Delete
 STREET ADDRESS: 10 GLENVILLE STREET
 CITY-ST-ZIP: GREENWICH, CT 06831

TITLE: CEO
 NAME: MCWATERS, JEFFREY L Delete
 STREET ADDRESS: 4425 CORPORATION LANE
 CITY-ST-ZIP: VIRGINIA BEACH, VA 23462

TITLE: SVP
 NAME: CHILDRESS, LORENZO JR Delete
 STREET ADDRESS: 4425 CORPORATION LANE
 CITY-ST-ZIP: VIRGINIA BEACH, VA 23462

TITLE: D
 NAME: MCBRIDE, WILLIAM J Delete
 STREET ADDRESS: 150 GOLF HOUSE ROAD
 CITY-ST-ZIP: HAVERFORD, PA 19041

TITLE: D
 NAME: REINHARDT, UWE E PHD Delete
 STREET ADDRESS: 351 WALLACE HALL
 CITY-ST-ZIP: PRINCETON, NJ 08544

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/04
 Date

757-321-3507
 Daytime Phone #