2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2006 8:00 am
Secretary of State
02-07-2006 90021 003 ***158.75

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1. Entity Name
SUMMIT HEALTH PLAN, INC.

40009864

Principal Place of Business	Mailing Address
300 SOUTH PARK RD. HOLLYWOOD, FL 33021	300 SOUTH PARK RD. HOLLYWOOD, FL 33021

01162006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
760 N.W. 107 AVE	SAME
Suite, Apt. #, etc.: SUITE 400	Suite, Apt. #, etc.:
City & State: MIAMI, FLORIDA	City & State:
Zip: 33172 Country: USA	Zip: Country:

4. FEI Number: 20-1976986 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COHEN, GERALD M 300 SOUTH PARK RD. HOLLYWOOD, FL 33021	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, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BERDING, RONALD J 300 SOUTH PARK RD HOLLYWOOD, FL 33021	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO/DIRECTOR WYSS, THOMAS C 760 NW 107TH AVE MIAMI FLORIDA 33172	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DCOO HOGAN, JAMES M 300 SOUTH PARK RD HOLLYWOOD, FL 33021	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR/CFO STEWART, RANDAL J 760 NW 107TH AVE MIAMI FLORIDA 33172	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST COHEN, GERALD M 300 SOUTH PARK RD HOLLYWOOD, FL 33021	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR MCGOOHAN, JOHN M.D. 760 N.W. 107TH AVE MIAMI, FLORIDA 33172	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP COHEN, GERALD M 300 SOUTH PARK RD HOLLYWOOD, FL 33021	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCOTT, STEVEN M M.D. 2828 CROASDAILE DR DURHAM, NC 27705	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WYSS, THOMAS C 300 SOUTH PARK RD HOLLYWOOD, FL 33021	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Randal J Stewart RANDAL J. STEWART 1/31/06 954 962-3005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #