

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

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**Apr 03 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P05822 (2)**

1. Corporation Name  
**MEDIC COMPUTER SYSTEMS, INC.**



Principal Place of Business <b>8601 SIX FORKS ROAD                  SUITE 300                  RALEIGH NC 27615</b>	Mailing Address <b>8601 SIX FORKS ROAD                  SUITE 300                  RALEIGH NC 27615-2981</b>
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3. Date Incorporated or Qualified <b>04/26/1985</b>	3a. Date of Last Report <b>04/11/1996</b>
4. FEI Number <b>56-1306083</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.  
 1201 HAYS ST.  
 SUITE 105  
 TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Sign in type 1 or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstalling)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	MCCONNELL, JOHN P.	
STREET ADDRESS	8601 SIX FORKS ROAD SUITE 300	
CITY-ST-ZIP	RALEIGH NC	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	MCCONNELL, JOHN P.	
STREET ADDRESS	8601 SIX FORKS ROAD	
CITY-ST-ZIP	RALEIGH NC	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	PRICE, MARK L	
STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE NC	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ANTHONY, G. MICHAEL	
STREET ADDRESS	8601 SIX FORKS ROAD	
CITY-ST-ZIP	RALEIGH NC	
TITLE	VTS	<input type="checkbox"/> DELETE
NAME	ROTH, LUANNE L.	
STREET ADDRESS	8601 SIX FORKS ROAD	
CITY-ST-ZIP	RALEIGH NC	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	SAWYER, ROBERT M.	
STREET ADDRESS	8601 SIX FORKS ROAD	
CITY-ST-ZIP	RALEIGH NC	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

"See attached list for additional"

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* UPCFO  
 DATE: 3/27/97 (919) 897-8102

CR2E034 (9/96)

**MEDIC COMPUTER SYSTEMS, INC.**  
Raleigh, North Carolina

**Corporate Officers and Operating Company Executives**

<b>* John P. McConnell</b> SS# 226-74-8183	<b>President, CEO</b>	<b>8601 Six Forks Road, Suite 300</b> <b>Raleigh, North Carolina 27615</b>
<b>G. Michael Anthony</b> SS# 246-70-6522	<b>Vice President</b> <b>Engineering</b>	<b>8601 Six Forks Road, Suite 300</b> <b>Raleigh, North Carolina 27615</b>
<b>Luanne L. Roth</b> SS# 303-64-8297	<b>Vice President, CFO</b> <b>Secretary; Treasurer</b>	<b>8601 Six Forks Road, Suite 300</b> <b>Raleigh, North Carolina 27615</b>
<b>Mark L. Price</b> SS# 463-13-3061	<b>Vice President</b> <b>Hotline Support Austin</b>	<b>110 Wild Basin Road, Suite 160</b> <b>Austin, Texas 78746</b>
<b>Kenneth B. Howard</b> SS# 239-88-5486	<b>Vice President</b> <b>Sales &amp; Marketing</b>	<b>8601 Six Forks Road, Suite 300</b> <b>Raleigh, North Carolina 27615</b>
<b>Bruce H. MacLeod</b> SS# 243-94-1882	<b>Vice President</b> <b>East Region-Sales</b>	<b>8601 Six Forks Road, Suite 300</b> <b>Raleigh, North Carolina 27615</b>
<b>Eric W. Sellers</b> SS# 246-02-7534	<b>Vice President</b>	<b>8601 Six Forks Road, Suite 300</b> <b>Raleigh, North Carolina 27615</b>
<b>David A. Bond</b> SS# 231-64-0793	<b>Vice President</b> <b>Mergers and Acquisitions</b>	<b>8601 Six Forks Road, Suite 300</b> <b>Raleigh, North Carolina 27615</b>
<b>R. Marcus Winchester</b> SS# 239-80-6234	<b>Vice President</b> <b>West Region-Sales</b>	<b>1633 Bayshore Hwy., Suite 160</b> <b>Burlingame, California 94010</b>
<b>Michael J. Custode</b> SS# 149-44-6498	<b>Vice President</b> <b>Product Strategy</b>	<b>Medic Computer Systems, Inc.</b> <b>One Ethel Road, Suite 105</b> <b>Edison, New Jersey 08817</b>
<b>Lawrence G. Drappi</b> SS# 155-46-2409	<b>Vice President</b> <b>Northeast Region-</b> <b>Sales</b>	<b>Medic Computer Systems, Inc.</b> <b>One Ethel Road, Suite 105</b> <b>Edison, New Jersey 08817</b>
<b>Debra M. Hampson</b> SS# 186-42-2500	<b>Vice President</b> <b>Central Region Sales</b>	<b>Medic Computer Systems, Inc.</b> <b>Foster Plaza VI</b> <b>681 Andersen Drive</b> <b>Pittsburgh, PA 15220</b>

**Michael Cassata**

**Vice President**

**c/o National Medical Systems  
Medic Computer Systems, Inc.  
Westboro Executive Park  
110 Turnpike Road  
Westboro, MA 01581-2804**

**Richard J. Goldberg**

**Vice President  
Customer Sales**

**Medic Computer Systems, Inc.  
Foster Plaza VI  
661 Andersen Drive  
Pittsburgh, PA 15220**

**Thomas K. Skelton, Jr.**

**Vice President  
Research & Development**

**Medic Computer Systems, Inc.  
8601 Six Forks Road Ste. 300  
Raleigh, NC 27616**

**Medic Computer Systems  
Board of Directors**

**John L. Corse**  
Hughes Advanced Systems  
A Division of Hughes Aircraft  
1801 Hughes Drive, Mail Stop C-311  
Fullerton, CA 92634  
Phone (714) 446-2323  
Fax (714) 446-2244

*Home Address:*  
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Phone (703) 734-0007  
Fax (703) 734-0682

**Patrick V. Hampson**  
MED3000 Group, Inc.  
Foster Plaza 7, 661 Andersen Drive  
Pittsburgh, PA 15220-2746  
Phone (412) 937-8887  
Fax (412) 937-9221

*Home Address:*  
120 Snowberry Lane  
Pittsburgh, PA 15044  
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**John P. McConnell**  
Medic Computer Systems, Inc.  
8601 Six Forks Road, Suite 300  
Raleigh, NC 27615  
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Direct Line (919) 848-5701  
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*Home Address:*  
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Raleigh, NC 27615  
Phone (919) 847-6920

**Thomas Nelson**  
Wakefield Group  
1110 E. Morehead Street  
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Phone (704) 372-0355  
Fax (704) 372-8978

*Home Address:*  
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**Alan W. Winchester**  
Medic Computer Systems, Inc.  
8601 Six Forks Road, Suite 300  
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