

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000101009

FILED
Jan 18, 2010
Secretary of State

Entity Name: MANAGED CARE OF NORTH AMERICA INC. OF NORTH CAROLINA

Current Principal Place of Business:

3230 WEST COMMERCIAL BLVD
SUITE 190
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

3230 WEST COMMERCIAL BLVD
SUITE 190
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 26-3555747 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCNA DENTAL PLANS
3230 WEST COMMERCIAL BLVD
SUITE 190
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: COO
Name: FEINGOLD, GLEN
Address: 3230 WEST COMMERCIAL BLVD
City-St-Zip: SUITE 190, FL 33309 US

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: GLEN FEINGOLD

COO

01/18/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date