

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 8:00 am
Secretary of State

01-20-2004 90046 021 ***150.00

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01132004 Chg-P CR2E034 (10/03)

DOCUMENT # P98000037049 1. Entity Name MEDADVANTAGE, INC.					
Principal Place of Business 3452 LAKE LYNDA DRIVE #250 ORLANDO, FL 32817			Mailing Address 3452 LAKE LYNDA DRIVE #250 ORLANDO, FL 32817		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 65-0836895	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent HINES, KIM 777 S FLAGLER DRIVE 1900 PHILLIPS POINT WEST WEST PALM BEACH, FL 33401-6198			7. Name and Address of New Registered Agent Name John B. Witty Street Address (P.O. Box Number is Not Acceptable) 2345 Westminister Ter. City Oviedo FL Zip Code 32765		
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 John B. Witty John B. Witty 1-14-04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NEVILLE, KATHRYN A 2600 PROFESSIONALS DR., BOX 150 OKEMOS, MI 488050150	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT MORELLO, JAMES J 188 BROOKWOOD PL STE 500 BIRMINGHAM, AL 35209	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WITTY, JOHN B 3452 LAKE LYNDA DR, #250 ORLANDO, FL 32817	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BARRETT, JOHN C 3452 LAKE LYNDA DR, #250 ORLANDO, FL 32817	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIEDMAN, HOWARD 108 BRECKWOOD PL STE 500 BIRMINGHAM, AL 35209	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C ADAMO, VICTOR T 2600 PROFESSIONALS DR BOX 150 OKEMOS, MI 488050150	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☒ Addition				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ 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: John B. Witty John B. Witty 1-14-04 407-282-5131 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					