2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S50584

Entity Name: MANAGED CARE OF NORTH AMERICA, INC.

FILED Jan 21, 2020 **Secretary of State** 4147120572CC

Current Principal Place of Business:

200 WEST CYPRESS CREEK ROAD

SUITE 500

FORT LAUDERDALE, FL 33309

Current Mailing Address:

200 WEST CYPRESS CREEK ROAD

SUITE 500

FORT LAUDERDALE, FL 33309 US

FEI Number: 65-0303864 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LACASA, CARLOS A. ESQ. 200 WEST CYPRESS CREEK ROAD SUITE 500

FORT LAUDERDALE, FL 33309 US

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: CARLOS A. LACASA 01/21/2020

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR, PRESIDENT Title DIRECTOR

FEINGOLD, JEFFREY P DDS Name Name FEINGOLD, GLEN S

200 WEST CYPRESS CREEK ROAD 200 WEST CYPRESS CREEK ROAD Address Address

SUITE 500 SUITE 500

City-State-Zip: FORT LAUDERDALE FL 33309 City-State-Zip: FORT LAUDERDALE FL 33309

Title **DIRECTOR** Title **SECRETARY**

Name CLARKE, GARY J Name LACASA, CARLOS A ESQ.

Address 411 EAST COLLEGE AVENUE Address 200 WEST CYPRESS CREEK ROAD

SUITE 500 City-State-Zip: TALLAHASSEE FL 32301

City-State-Zip: FORT LAUDERDALE FL 33309

Title **TREASURER** Title DIRECTOR

Name STRONGIN, EDWARD A HAMMER, SAMUEL Name

200 WEST CYPRESS CREEK ROAD Address 200 WEST CYPRESS CREEK ROAD Address SUITE 500

SUITE 500 FORT LAUDERDALE FL 33309

City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR

City-State-Zip:

Name GREENMAN, JACK

Address 200 WEST CYPRESS CREEK ROAD SUITE 500

City-State-Zip: FORT LAUDERDALE FL 33309

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.

01/21/2020 SIGNATURE: CARLOS LACASA SR. VICE PRESIDENT