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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 507463

PLAN COORDINATORS AND ADMINISTRATORS, INC.

Suite, Apt. #, etc. 27							44 (1) 614(616) 616(44 (1) 614(616)	
SIE 800 US 1. Principal Place of Business 1. Applied For Intelligence of Business 2. Making Audress 3. Date Incorporated or Gualified On 17/20/1976 3. Date Incorporation Incorporated On 18/20/1976 3. Date Incorporation Incorporated On 18/20/1976 3. Date Incorporation Incorporated On 18/20/1976 3. Date Incorporation In	Principal Plac	e of Business	Mailing Address					
TAMPA FL 33889 US 1. Do Not' With In 1988 1. Do Not' With In 1988 2. Principal Place of Business 2. A Malling Address 2. Principal Place of Business 3. Date Incorporated or Qualified 07/20/1976 2. Principal Place of Business 3. A Malling Address 4. FE Number 59-1680365 1. Not Applicable 58-175 Addition Fee Required Fee Required 70 Country 70 Country 71 City & State 72 Country 72 Country 73 Country 74 Parsonal Property Transcript 75 Parsonal		09				Į.		
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Suite, Apl. 8, etc. Suite, Apl. 8, etc. Suite, Apl. 8, etc. Suite, Apl. 8, etc. Since	2. Principal P	lace of Business	2a. Mailing Address				. 14	Applied For
Suite, Apt. 8, etc. 27	21		26			59-1680365		Not Applicable
27 City & State		#, etc.	Suite, Apt. #, etc.			5 Certificate of Status Desired	1 1	
Zip Country Zip Zi	22			_		5. 90 months	F	
Zip		e	City & State					
28	23							
9. Name and Address of Current Registered Agent FRIES, MAX A 4830 W. KENNDY BLVD. STE. 800 TAMPA FL 33609 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 approximent as registered gent, and acceptable bligations of, Section 607 (508, 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 approximent as registered gent and the registered agent and the registered agent and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent and the provision of purpose of changing its registered agent and the corporation's board of directors. I hereby accept the approximent as registered agent and the corporation's board of directors. I hereby accept the approximent as registered agent and the corporation's board of directors. I hereby accept the approximent as registered agent and acceptable and acc	⊢		_ <u>_</u> _	¬ '		** · · · · · · · · · · · · · · · · · ·		
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14. 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP