

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000000106

FILED
Oct 19, 2004
Secretary of State

Entity Name: PLANVISTA CORPORATION

Current Principal Place of Business:

4010 W BOY SCOUT BLVD
STE 200
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

4010 W BOY SCOUT BLVD
STE 200
TAMPA, FL 33607

New Mailing Address:

C/O PROXYMED, INC., LEGAL DEPARTMENT
1854 SHACKLEFORD COURT, #200
NORCROSS, GA 30093

FEI Number: 13-3787901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: SCD () Delete
Name: DINGLE, PHILLIP S
Address: 4010 W BOY SCOUT BLVD STE 200
City-St-Zip: TAMPA, FL 33607

Title: P () Delete
Name: MARKLE, JEFFREY L
Address: 4010 W BOY SCOUT BLVD STE 200
City-St-Zip: TAMPA, FL 33607

Title: CFO () Delete
Name: SCHMELING, DONALD W
Address: 4010 W BOY SCOUT BLVD STE 200
City-St-Zip: TAMPA, FL 33607

Title: V () Delete
Name: KEARNS, JAMES T
Address: 419 EAST MAIN STREET
City-St-Zip: MIDDLETOWN, NY 10940

Title: V () Delete
Name: MARTIN, ROBERT A
Address: 3501 FRONTAGE ROAD
City-St-Zip: TAMPA, FL 33607

Title: D (X) Delete
Name: BENNETT, WILLIAM L
Address: 149 COMMON STREET
City-St-Zip: DEDHAM, MA 02026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: HAM, NANCY J
Address: 1854 SHACKLEFORD COURT, #200
City-St-Zip: NORCROSS, GA 30093

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SCHMID, JUDSON E
Address: 1854 SHACKLEFORD COURT, #200
City-St-Zip: NORCROSS, GA 30093

Title: S (X) Change () Addition
Name: GREGORY, EISENHAUER J
Address: 1854 SHACKLEFORD COURT, #200
City-St-Zip: NORCROSS, GA 30093

Title: D (X) Change () Addition
Name: HOOVER, MICHAEL K
Address: 1854 SHACKLEFORD COURT, #200
City-St-Zip: NORCROSS, GA 30093

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JUDSON E. SCHMID

T

10/19/2004

Electronic Signature of Signing Officer or Director

Date