2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 08:00 A
Secretary of State

DOCUMENT # F02000002581

1. Entity Name
THE AMERIGROUP CHARITABLE FOUNDATION, INC.

Principal Place of Business	Mailing Address
C/O AMERIGROUP CORPORATION 4425 CORPORATION LANE VIRGINIA BEACH, VA 23462	C/O AMERIGROUP CORPORATION 4425 CORPORATION LANE VIRGINIA BEACH, VA 23462

DO NOT WRITE IN THIS SPACE

04062007 No Chg-NP CR2E037 (4/06)

4. FEI Number
54-2014061
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	MCWATERS, JEFFREY L
STREET ADDRESS	4425 CORPORATION LANE, #300
CITY-ST-ZIP	VIRGINIA BEACH, VA 23462
TITLE	D
NAME	ZORETIC, RICHARD
STREET ADDRESS	4425 CORPORATION LANE
CITY-ST-ZIP	VIRGINIA BEACH, VA 23462
TITLE	VS
NAME	BALDWIN, STANLEY F
STREET ADDRESS	4425 CORPORATION LANE, #300
CITY-ST-ZIP	VIRGINIA BEACH, VA 23462
TITLE	V
NAME	ANGLIN, SCOTT
STREET ADDRESS	4425 CORPORATION LANE, #300
CITY-ST-ZIP	VIRGINIA BEACH, VA 23462
TITLE	D
NAME	LITTEL, JOHN
STREET ADDRESS	4425 CORPORATION LANE, #308
CITY-ST-ZIP	VIRGINIA BEACH, VA 23462
TITLE	D
NAME	GRDEN, NANCY L
STREET ADDRESS	4425 CORPORATION LANE, #300
CITY-ST-ZIP	VIRGINIA BEACH, VA 23462

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05/08/07-80082-019 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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: O.K. KLS 4/6/07 John Littel VP 4/17/07 757-490-6900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #