

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000855

FILED
May 03, 2010
Secretary of State

Entity Name: AMGP GEORGIA MANAGED CARE COMPANY, INC.

Current Principal Place of Business:

303 PERIMETER CENTER NORTH
SUITE 400
ATLANTA, GA 30246

New Principal Place of Business:

Current Mailing Address:

303 PERIMETER CENTER NORTH
SUITE 400
ATLANTA, GA 30246

New Mailing Address:

FEI Number: 06-1696189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D
Name: SHIPP, C BRIAN
Address: 22 CENTURY BLVD, SUITE 310
City-St-Zip: NASHVILLE, TN 37214

Title: DV
Name: LINDSEY, MELVIN
Address: 303 PERIMETER CENTER NORTH, SUITE 400
City-St-Zip: ATLANTA, GA 30346

Title: DV
Name: SCOTT, TISCH
Address: 303 PERIMETER CENTER NORTH, SUITE 400
City-St-Zip: ATLANTA, GA 30346

Title: DV
Name: PACE, NICHOLAS J
Address: 4425 CORPORATION LANE
City-St-Zip: VIRGINIA BEACH, VA 23462

Title: VS
Name: BALDWIN, STANLEY F
Address: 4425 CORPORATION LANE
City-St-Zip: VIRGINIA BEACH, VA 23462

Title: V
Name: SHIELDS, KAREN L
Address: 4425 CORPORATION LANE
City-St-Zip: VIRGINIA BEACH, VA 23462

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.

SIGNATURE: KAREN L. SHIELDS

V

05/03/2010

Electronic Signature of Signing Officer or Director

Date