**FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00**

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
**Sandra B. Mortham**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000001723 (6)

1. Corporation Name
CSC HEALTHCARE SYSTEMS, INC.

DO NOT WRITE IN THIS SPACE

| Principal Place of Business | Mailing Address |
|---|---|
| 34505 W. TWELVE MILE RD., SUITE 300<br>FARMINGTON HILLS MI 48331 | 2100 E. GRAND AVE.<br>APT. A-267<br>EL SEGUNDO CA 90245<br>US |

3. Date Incorporated or Qualified: 04/01/1993

4. FEI Number: 38-3101704 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 | 26 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 | City & State 28 |
| Zip 24 Country 25 | Zip 29 Country 30 |

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

| | | |
|---|---|---|
| TITLE | PD | ☐ DELETE |
| NAME | HUNTZINGER, GEORGE S | |
| STREET ADDRESS | 34505 W. TWELVE MILE RD., SUITE 300 | |
| CITY-ST-ZIP | FARMINGTON HILLS MI 48331 | |
| TITLE | VPDT | ☐ DELETE |
| NAME | LEVEL, LEON J | |
| STREET ADDRESS | 2100 E. GRAND AVENUE | |
| CITY-ST-ZIP | EL SEGUNDO CA | |
| TITLE | VPSD | ☐ DELETE |
| NAME | FISK, HAYWARD D | |
| STREET ADDRESS | 2100 E. GRAND AVENUE | |
| CITY-ST-ZIP | EL SEGUNDO CA 90245 | |
| TITLE | AS | ☒ DELETE |
| NAME | CRANE, DENIS M | |
| STREET ADDRESS | 2100 EAST GRAND AVENUE | |
| CITY-ST-ZIP | EL SEGUNDO CA | |
| TITLE | VP | ☐ DELETE |
| NAME | DOOLEY, DENNIS J | |
| STREET ADDRESS | 34505 W. TWELVE MILE RD., SUITE 300 | |
| CITY-ST-ZIP | FARMINGTON HILLS MI 48331 | |
| TITLE | D | ☐ DELETE |
| NAME | HONEYCUTT, VAN B | |
| STREET ADDRESS | 2100 E. GRAND AVE. | |
| CITY-ST-ZIP | EL SEGUNDO CA | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

*** PLEASE SEE ATTACHED ***

| | | |
|---|---|---|
| 1.1 TITLE | | ☐ Change ☐ Addition |
| 1.2 NAME | | |
| 1.3 STREET ADDRESS | | |
| 1.4 CITY-ST-ZIP | | |
| 2.1 TITLE | | ☐ Change ☐ Addition |
| 2.2 NAME | | |
| 2.3 STREET ADDRESS | | |
| 2.4 CITY-ST-ZIP | | |
| 3.1 TITLE | | ☐ Change ☐ Addition |
| 3.2 NAME | | |
| 3.3 STREET ADDRESS | | |
| 3.4 CITY-ST-ZIP | | |
| 4.1 TITLE | | ☐ Change ☐ Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY-ST-ZIP | | |
| 5.1 TITLE | | ☐ Change ☐ Addition |
| 5.2 NAME | | |
| 5.3 STREET ADDRESS | | |
| 5.4 CITY-ST-ZIP | | |
| 6.1 TITLE | | ☐ Change ☐ Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | | |
| 6.4 CITY-ST-ZIP | | |

CR2E034 (10/97)

14. I 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

SIGNATURE: [signature] LARRY D. GOODMAN 04/27/98 310/615-0311

CORPORATE DATA SHEET
**CSC HEALTHCARE SYSTEMS, INC.**

| | | | |
|---|---|---|---|
| **ID#** | 38-3101704 | | |
| **ADDRESS:** | 34505 W. Twelve Mile Road, Ste. 300, Farmington Hills, MI 48331 | | |
| **PRINCIPAL BUSINESS:** | Software Development, HMO Computer Systems | | |
| **OFFICERS:** | George S. Huntzinger | President | 2100 E. Grand Ave. El Segundo, CA 90245 |
| | Hayward D. Fisk | VP & Secretary | 2100 E. Grand Ave. El Segundo, CA 90245 |
| | Leon J. Level | Vice President | 2100 E. Grand Ave. El Segundo, CA 90245 |
| | Dennis J. Dooley | Vice President and Controller | 2100 E. Grand Ave. El Segundo, CA 90245 |
| **DIRECTORS:** | Van B. Honeycutt | | 2100 E. Grand Ave. El Segundo, CA 90245 |
| | Leon J. Level | | 2100 E. Grand Ave. El Segundo, CA 90245 |
| | Hayward D. Fisk | | 2100 E. Grand Ave. El Segundo, CA 90245 |
| **INCORPORATED:** | California | 17-Mar-93 | Named CSC Transition Inc. Name changed 4/16/93 |
| **STATUTORY AGENT:** | The Corporation Trust Corporation<br>One East First Street, Reno, NV 89501 | | |