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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000001723

CSC HEALTHCARE INC.

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90128 011 ***150.00



Principal Place of Business	Mailing Address		1 100 (100 1110 1010 11111 0011) 40111 40111			
34505 W. TWELVE MILE RD. SUITE 300 2100 E. GRAND AVE. FARMINGTON HILLS MI 48331 APT. A-267 EL SEGUNDO CA 90245 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
	•		04/01/1993			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		38-3101704	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip Co	ountry	This corporation owes the current year I Personal Property Tax.	ntangible ☐ Yes ☐ No		
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent				
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD			ress (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324		83				

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 of 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 of 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 of 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 of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of

City

agent. I a	m 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: Re	gistered Agent signature re	equired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	RS IN 12
TITLE	Р	X DELETE	1.1 TITLE	President	Change	☐ Addition
NAME	HUNTZINGER, GEORGE S		1.2 NAME	Arthur Spiegel, III		
STREET ADDRESS	2100 GRAND AVENUE		1.3 STREET ADDRESS	2100 E. Grand Ave.		
CITY-ST-ZIP	EL SEGUNDO CA 90245		1.4 CITY-ST-ZIP	El Segundo, CA 90245		
TITLE		☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	FISK, HAYWARD D		2.2 NAME			
STREET ADDRESS	2100 E GRAND AVENUE		2.3 STREET ADDRESS			
CITY-ST-ZIP	EL SEGUNDO CA 90245		2. 4 CITY-ST-ZIP			
TITLE	VPD	DELETE	3.1 TITLE		Change	☐ Addition
NAME	LEVEL, LEON J		3.2 NAME			
STREET ADDRESS	2100 E GRAND AVENUE		3.3 STREET ADDRESS			
CITY-ST-ZIP	EL SEGUNDO CA 90245		3.4. CITY-ST-ZIP			
TITLE	VPC	DELETE	4.1 TITLE		Change	☐ Addition
NAME	DOOLEY, DENNIS J		4. 2 NAME			
STREET ADDRESS	2100 E GRAND AVENUE		4.3 STREET ADDRESS			
CITY-ST-ZIP	EL SEGUNDO CA 30245		4.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE	5.1 TITLE	:	Change	☐ Addition
NAME	HONEYCUTT, VAN B		5.2 NAME			
STREET ADDRESS	2100 E GRAND AVENUE		5.3 STREET ADDRESS			
CITY-ST-ZIP	EL SEGUNDO CA 90245		5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE	D	Change	Addition
NAME	HONEYCUTT, VAN B	-	6.2 NAME	Leon J. Level		
STREET ADDRESS	2100 E. GRAND AVE.		6.3 STREET ADDRESS	2100 E. Grand Ave.		
CITY-ST-ZIP	EL SEGUNDO CA		6.4 CITY-ST-ZIP	El Segundo, CA 90245		

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, with all other like empowered.

IGNATURE:

Larry D. Goodman 3/22/99 (310) 615-0311

SIGNATURE:

CR2E034 (11/98)

85 Zip Code

CORPORATE DATA SHEET **CSC HEALTHCARE INC.**

38-3101704 巻

34505 W. Twelve Mile Road, Ste. 300, Farmington Hills, MI 48331 ADDRESS:

PRINCIPAL

Software Development, HMO Computer Systems BUSINESS:

OFFICERS:

President Arthur H. Spiegel, III

Larry D. Goodman

Hayward D. Fisk Leon J. Level

Assistant Treasurer VP & Secretary

Vice President & Trea

Vice President

David T. Gershen

H. Ward Classen

Dennis J. Dooley

2100 E. Grand Ave. El Segundo, CA 90245 2100 E. Grand Ave. El Segundo, CA 90245

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2100 E. Grand Ave. El Segundo, CA 90245 2100 E. Grand Ave. El Segundo, CA 90245

VP - Finance & Admin 2100 E. Grand Ave. El Segundo, CA 90245

Assistant Secretary

2100 E. Grand Ave. El Segundo, CA 90245

2100 E. Grand Ave. El Segundo, CA 90245 2100 E. Grand Ave. El Segundo, CA 90245

2100 E. Grand Ave. El Segundo, CA 90245 2100 E. Grand Ave. El Segundo, CA 90245

Arthur H. Spiegel, III Hayward D. Fisk

Van B. Honeycutt

DIRECTORS:

Leon J. Level

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