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**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 9:40

DOCUMENT # F93000002486 (9)

1. Corporation Name

THIRD PARTY LIABILITY RECOVERY, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

401 PARK AVENUE SOUTH
NEW YORK NY 10016

401 PARK AVENUE SOUTH
NEW YORK NY 10016

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/27/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

13-2770433

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has liability or intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suits, Apt # etc.

26 Suits, Apt # etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST
STE 105
TALLAHASSEE FL 32301

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 filed in block 9)

(Signature typed or printed name of new registered agent)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTCD
NAME	KERZ, PAUL J
STREET ADDRESS	401 PARK AVENUE SOUTH
CITY ST ZIP	NEW YORK NY 10016
TITLE	D
NAME	HOLSTER, ROBERT M
STREET ADDRESS	401 PARK AVENUE SOUTH
CITY ST ZIP	NEW YORK NY 10016
TITLE	SV
NAME	SIMON, LAURENCE B
STREET ADDRESS	401 PARK AVENUE SOUTH
CITY ST ZIP	NEW YORK NY 10016
TITLE	VF
NAME	REMLEY, SCOTT A
STREET ADDRESS	401 PARK AVENUE SOUTH
CITY ST ZIP	NEW YORK NY 10016
TITLE	V
NAME	KEEFER, DANA
STREET ADDRESS	401 PARK AVENUE SOUTH
CITY ST ZIP	NEW YORK NY 10016
TITLE	V
NAME	MANDEL, MARK D
STREET ADDRESS	401 PARK AVENUE SOUTH
CITY ST ZIP	NEW YORK NY 10016

1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2	NAME	
3	STREET ADDRESS	
4	CITY ST ZIP	
5	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6	NAME	
7	STREET ADDRESS	
8	CITY ST ZIP	
9	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10	NAME	
11	STREET ADDRESS	
12	CITY ST ZIP	
13	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14	NAME	
15	STREET ADDRESS	
16	CITY ST ZIP	
17	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18	NAME	
19	STREET ADDRESS	
20	CITY ST ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 130.07(3)(b), 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 1302, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with my address.

SIGNATURE:

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Scott A. Remley 5/20/95 210-685-4545
 (Typed Name) (Date) (Telephone Number)

HEALTH MANAGEMENT SYSTEMS, INC
EIN: 13-2770433
DIRECTORS
Florida Annual Report Box 13

F93 - 2486

Directors
D Neal, William W. Broadway & Seymour 128 South Tryon Street Charlotte, NC 28202
D Stowe, Richard H. Welsh, Carson Anderson & Stowe 200 Liberty Street Suite 3601 New York, NY 10281
D Carson, Russell L. Welsh, Carson Anderson & Stowe 200 Liberty Street Suite 3601 New York, NY 10281
D Powers, Galen D. Powers, Pyles & Sutter, P.C. 1275 Pennsylvania Avenue. N.W. Washington, D.C. 20004

HEALTH MANAGEMENT SYSTEMS, INC

EIN: 13-2770433

OFFICERS

Florida Annual Report Box 13

F93-248b

Officers
V Clejan, Marc. A. 401 Park Ave South New York, NY 10016
V Fleishman, Peter G. 401 Park Ave South New York, NY 10016
V Holt, Alexandra F. 401 Park Ave South New York, NY 10016
V Kugajevsky, Victor I. 2000 L Street Suite 200 Washington, D.C. 20036
V Levetown, Lewis D. 401 Park Ave South New York, NY 10016
V Lipack, Richard 401 Park Ave South New York, NY 10016
V Rosen, Stuart 401 Park Ave South New York, NY 10016
V Staffa, Donald J. 401 Park Ave South New York, NY 10016
V Strait, Lindsay, E. 401 Park Ave South New York, NY 10016
V Strobel, Gregory A. 1990 Bundy Drive Los Angeles, CA 90025