**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

F9400006493 (0)

DOCUMENT #
1. Corporation Name CIC RISK MANAGEMENT CORPORATION

Principal Place of Business

Mailing Address

1148 BROADWAY PLAZA TACOMA WA 98402

1148 BROADWAY PLAZA TACOMA WA 98402



Thought the solution							
				3. Date Incorporated or Qualified	3a. Date of Last Report		
				12/20/1994	05/01/1995		
2. Principal Pla		2a. Mailing Address	٨		4. FET Number	Applied For	
21 400 W	lest Market St.	26 400 West	Mar k	et Si	7. 91-1642946	Not Applicable	
Suite, Apt. #	,_etc.	Suite, Apt. #, etc.		$\sim$		\$8.75 Additional	
22 3300 Providian Center 27 3300 Providi			idian	Cente	5. Certificate of Status Desired	Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23 Louis	ville KY	28 Louisville	K	/	Trust Fund Contribution	Added to Fees	
Zip Country Zip		Zip	70202 30 Courtry S		8. This corporation has liability for		
24 40202 25 US 29 4020			30	S		□ No	
9. Name and Address of Current Registered Agent			201 0	10. Name and Address of New Registered Agent			
81 Name							
C T CORPORATION SYSTEM			82	82 Street Address (P.O. Box Number is Not Acceptable)			
1200 SOUTH PINE ISLAND ROAD							
PLANTATION FL 33324			83				
			84	City		85 Zip Code	
			04	Only		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.							
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: speed or printed name of registered agent and title if application. (NOTE Registered Agent signs/ord required when rexistating).  DATE							
12.	OFFICERS AND		13.	n signarure requ	ADDITIONS/CHANGES TO OFF		
TITLE		DELETE	1. 1 TITLE			Change Addition	
	V	N PETEL	1		President	Change [] Addition	
NAME	PEISER, WILLIAM S JR		1.2 NAME	ĮΣ	N Bruce Lunsford	1-4-0	
STREET ADDRESS	1148 BROADWAY PLAZA		1.3 STREFT	ADDRESS 3	300 Providian Cent	er.	
CITY-ST-ZIP	TACOMA WA		1.4 CHY-S	T-ZIP	ovisville, KY 402	202	
THTLE	VCF0	🔀 DELETE	2 1 TITLE	- IV	//.FA .	Change 🔲 Addition	
NAME	PACQUER, ROBERT F		2.2 NAME	u	V. Earl Reed III.	•	
STREET ADDRESS	1148 BROADWAY PLAZA		23 STREET	ADDRESS 3	300 Providian Center	_	
CITY-ST-ZIP	TACOMA WA 98402		24 CHTY - S		ovisville KY 402	<b>1</b> /2	
TITLE	VSD	₩ DELETE	3 1 TITLE		15D	Change Addition	
NAMÉ		<b>CE</b>	32 NAME	\	Sill L. Force	g change C than sin	
	ADCOCK, RICHARD P				3300 Providian Center	_	
STREET ADDRESS	1148 BROADWAY PLAZA		33 STREE	1 -			
CITY-ST-ZIP	TACOMA WA 98402	mark on the	3.4 CITY - S	1-719	Louisville, KY 40	202	
TITLE	V	<b>\</b> \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	4 1 TITLE	. Jy	C. 10 Baca	Change 🔲 Addition	
NAME	SCOUMPERDIS, KRIS		4.2 NAME	γ	lichael R. Barrat	0.0	
STREET ADDRESS	1148 BROADWAY PLAZA		4.3 STREET	ADDRESS 3	300 Providian Cente		
CHY-ST-ZIP	TACOMA WA 98402		4.4 CITY-S	T-7/P	wisville KY 40	202	
TITLE	٧ī	<b>⊠</b> DELETE	5 1 TITLE	1.4	,	Change Addition	
NAME	SCHNEIDER, ROBERT K	•	5.2 NAME	<u>                                     </u>	pavid R. Windhors	.+	
STREET ADDRESS	1148 BROADWAY PLAZA		53 STREET	Anneres 3	300 Providian Center	<b>-</b>	
					ovisville, KY 402	ر دمر	
CITY-ST-ZIP THILE	TACOMA WA 98402	₩ DELETE	5.4 CITY-S	i s	17	Change	
	V	IN DECEM	6 1 TITLE	)	(ichard A. Lechleit	Change 🗌 Addition	
NAME .	WEITZ, MICHAEL B		6.2 NAME	K	lichard in Lebitori	er /see	
STREET ADDRESS	1148 BROADWAY PLAZA		6.3 \$1HEE1	ADDRESS 3	300 Providian Cent	or / 366.	
CITY - ST - ZIP	TACOMA WA 98402		64 00Y+S	T-ZiP	-ouisville, KY 402	202 (attached)	
14. Ldo hereby		th this filing is voluntarily furnish	ed and doe	s not qualify	v for the exemption stated in Section 119.		

SIGNATURE:

rate healty carried information supplied with this limit is voluntarily furnished and does not quarry for the exemption stated in Section 119.075/kg, Florida Statutes, Turner certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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. THE OF SIGNING OFFICER OR DIRECTOR

4/10/24

Daytme Phone #

282

## CIC RISK MANAGEMENT CORPORATION - Officer List Exhibit A 1996

W. Bruce Lunsford

Michael R. Barr

W. Earl Reed, III

Maria M. Levering Jill L. Force

James H. Gillenwater, Jr. Thomas M. Schuhmann David R. Windhorst Richard A. Lechleiter

Thomas T. Ladt Frank W. Anastasio Brian L. Pugh Steven L. Monaghan Mary Ann Evans Ralph H. Bellande June Nalley King T. Stephen Turner Susan L. McPherson William R. Cook James J. Novak Gary D. Witte Phillip D. Hurley Warren L. Herz John A. Vinson Bryan D. Burklow Richard P. Blinn

المساورة فللمساوحة

Chairman of the Board, President and Chief Executive Officer Chief Operating Officer and Executive Vice President Chief Financial Officer and Executive Vice President Vice Presidem, Administrative Services Vice President, General Counsel and Secretary Vice President, Planning and Development Vice President, Reimbursement Vice President, Financial Systems Vice President, Finance, Corporate Controller Executive Vice President, Operations Vice President, Ancillary Services Vice President, Program Development Vice President, Facility Accounting Vice President, Clinical Operations Vice President, Retirement Housing **Assistant Secretary** Senior Vice President, West Region Vice President, West Region Senior Vice President, Central Region Scnior Vice President, Southeast Region

Vice President, Southeast Region

Vice President, Northeast Region

Senior Vice President, South Central Region

Senior Vice President, North Central Region

Senior Vice President, Mountain Region

Senior Vice President, Northeast Region