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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500003743 (0) CMG HEALTH, INC.

## **FILED** Feb 05 1997 8:00am Secretary of State



Principal Plac						(5)))	
Principal Place of Business Mailing Address  **Conceptance Op. CTC 200						iker: måler dårad litti imdi: dia	198 (111 149)
25 CROSSROADS DR., STE 200 25 CROSSROADS DR., STE OWINGS MILL MD 21117-54							
					3. Date Incorporated or Qualified 08/02/1995	3a. Date of Last R 07/02/1996	eport
2. Principal F	Place of Business	2e. Mailing Address			4. FEI Number 52-1473182	<del></del>	oplied For ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 / Fee Re	Additional
City & Sta	te	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 Added	
Zıp	Country	Zip	Counti	у	8. This corporation has liability for	r intangible tax under s	199.032,
4	25	29	30			Yes No	
	9. Name and Address of Cur			41 4.	10. Name and Address of New R	legistered Agent	
	RPORATION SERVICE COMPA	ANY	8	Name			
	DI HAYS STREET		8:	2 Street Ad	dress (P.O. Box Number is Not Accepta	able)	
TAI	LLAHASSEE FL 32301-2525		_	<u> </u>	· · · · · · · · · · · · · · · · · · ·	·	
			8:	3			
			8-	4 City		<b>85</b> Zip (	Code
11. Pursuant office or agent 17	to the provisions of Sections 607.0 registered agent, or both, in the Stam am familiar with, and accept the ob	0502 and 607.1508, Florida S ate of Florida. Such change v oligations of, Section 607.050!	tatutes, the abor was authorized t 5, Florida Statute	ve-named o by the corposes.	orporation submits this statement for the oration's board of directors. I hereby accoration	purpose of changing it ept the appointment as	ts registered registered
SIGNATURE	Storiature, typed or practice man eight registered	Lagent and title Langicable	(NOTE: Registered A	oen) signalure re	equired when reinstating)	DATE	
12.			7-10-12: Trogistorous 1				
12.	Unitensi	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	RS IN 12
	DC OFFICENS	AND DIRECTORS  DELETE			ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	
TITLE				- 1	ADDITIONS/CHANGES TO OFF		
TITLE	DC	DELETE	1.1 TITLE	- 1	ADDITIONS/CHANGES TO OFF		
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VIII.E NAME STREET ADDRESS CITY-ST-ZIP DITLE NAME	DC SHUSTERMAN, ALAN J 25 CROSSROADS DR., STI OWINGS MILL MD 21117 DC CANN, RONALD E	☐ DELETE <b>E 200</b> ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME	ET ADDRESS ST-ZIP	Owings Mills, MD 21 T Curt A.H. Jeschke Jr.	Change	Addition
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The manager of the component war any manager war are mornaged war are ming ones not quality for the exemption stated in Section 119.07(3)(). 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.