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

PROFIT CORPORATION **ANNUAL REPORT**



Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # F95000003743 (0)

CMG HEALTH, INC.

Principal Place of Business

25 CROSSROADS DR., STE 200

Mailing Address

25 CROSSROADS OR., STE 200

FILED May 01 1998 8:00am Secretary of State



OHTMOS MILL NO 21117		OWINGS MILE MD 21117		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 08/02/1995		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		28 3414 PEACATREE RD, NE			≤ 52-1473182	Not Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.		J	\$8.75 Additional		
22		27 SUITE 1400			5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28 ATLANTA GI	4		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the curr	ent year Intangible	
24	25	29 30326 3	0 115	>		Yes No	
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY				Name			
1201 HAYS STREET			82	Street Ar	ddress (P.O. Box Number is Not Acceptable)		
	LLAHASSEE FL 32301-2525			Giloci A	duress (1.0. box Humber is Not Acceptable)	ì	
			63				
			84			Top 7's Ords	
			84	City	· FL	85 Zip Code	
11. Pursuant to the provisions of Sections 607.050? 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	<u> </u>						
	Signature, typed or prefet more of registered age. OFFICERS AND			ent signature re	aguirad when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 10	
12.	DC OFFICERS AND	DELETE	13.			Change Addition	
NAME	SHUSTERMAN, ALAN J	Z VICETE	1.2 NAME				
· -	25 CROSSROADS DR., STE 2	inn		ADDRESS 3	SANFORD, CHARLOTTE A 3414 PEACHTREE RD, NE, STE	1900	
STREET ADDRESS	OWINGS MILLS MD	:00	1		•		
CITY-SI-ZIP TITLE	DC	DELETE	1.4 CITY - S 2.1 TITLE	7	TZANTA GA 30326	Change X Addition	
	CANN, RONALD E	CA OCICIE		2	BEDENBAUGH, JAMES R	CI change the required	
NAME .		5 004	22 NAME		3414 PEACHTREE RANE, ST	5 1400	
STREET ADDRESS	2107 LAUREL BUSH RD., STE	201	2.3 STAEET	ADDRESS	SAIA LEUCH (KEE KI)		
CITY-ST-ZIP	BEL AIR MD 21015	IX DELETE	2. 4 CITY-	ST-ZIP	ATLANTA BA 30326	Change Addition	
TITLE	D PAY DOUGLAS A	Deterie	3 1 TITLE		CUZZELL CHERIE	Citalitie 122 vooilloii	
NAME	KAY, DOUGLAS A	100	32 NAME		1914 PEACHTREE RD, NE, STE	1400	
STREET ADDRESS	25 CROSSROADS DR., STE 2	:00		ADDRESS 3	ATIANTA AL DANA	. ,	
CITY-ST-ZIP	OWINGS MILLS MD	DELFTE	3.4. CITY-	ST-ZIP	TLANTA GA 30326	Change X Addition	
TITLE	ACKED MINISTE	EXPERIT	41 TITLE	n,		Change X Addition	
NAME	ACKER, WILLIAM	1975 440	4. 2 NAME	r.	LUMMINGS ANDREW M.	ļ	
STREET ADDRESS	100 BROOKWOOD PLACE, S	VIIE 410	ľ	ADDRESS	DNE MAYNARD DRIVE PARK PIDSE NS 07656	İ	
CITY-ST-ZIP	BIRMINGHAM AL 35209	N sect	4.4 CITY-S	T-ZIP	PAKK RIDGE NS 07656	Observe Marketon	
TITLE	S 054450 W. D	DELETE	5.1 TOLE		•	Change Addition	
NAME	REAMER, JILL B		5.2 NAME	-		ļ	
STREET ADDRESS	25 CROSSROADS DR., STE 2	.UU	53 STREET				
CITY-ST-ZIP	OWINGS MILLS MD	No action	5.4 CITY - S	IT-ZIP			
TITLE	T	™ DELETE	61 TITLE	- 1	•	Change Addition	
NAME	JESCHKE, CURT A.H. JR		6.2 NAME			ļ	
STREET ADDRESS	25 CROSSROADS DR STE 20)O	63 STREET	ADDRESS			

14. Thereby 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 of 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 chapted down an altachment with an address. CHARLOTTE A. SANFORD VICE PRESIDENT

SIGNATURE:

CITY-ST-ZIP

(404) 819-9200

CMG HEALTH, INC.

ADDITIONAL OFFICERS

Patrick D. Schmeideler Vice President - Taxes

Business: One Maynard Drive, Park Ridge, NJ 07656

Michelle H. Ancosky Assistant Secretary

Business: 3414 Peachtree Road, NE, Suite 1400, Atlanta, GA 30326

Marian Lang Assistant Secretary

Business: 3414 Peachtree Road, NE, Suite 1400, Atlanta, GA 30326