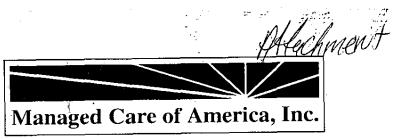
2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 16, 2004 8:00 am Secretary of State 07-16-2004 90001 030 ***158.75

1. Entity Name	MENT # F950000 D CARE OF AMERICA,			07-16-2004 90001 030 ***158.75
Principal Place 820 PARISH S PITTSBURGH,	ST ;	Mailing Address 820 PARISH ST PITTSBURGH, PA 15	5220	
2. Principal Pl	ace of Business	3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07072004 Chg-P CR2E034 (10/03)
City & State		City & State		4. FEI Number Applied For 25-1687916 Not Applicate
Zip	Country	Zip	Country	5. Certificate of Status Desired
	6. Name and Address of Cur	rent Registered Agent	Name	7. Name and Address of New Registered Agent
	ANDOLPH J ANKLIN ST.			See Attached ress (P.O. Box Number is Not Acceptable)
SUITE 210	0			
TAMPA, FL	. 33602		City	EL Zip Code
8. The above	named entity submits this statem	ent for the purpose of changing	its registered office or re	egistered agent, or both, in the State of Florida. I am familiar with, and acce
Du Du	E NOW!!! FEE IS \$150.0 le by September 8, 2004	Trust Fund C		\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
TITLE	OFFICERS CEOD	AND DIRECTORS Delete	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
name Street address City-St-Zip	SHEHAB, PHYLLIS L 820 PARISH ST PITTSBURGH, PA 15220		NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	PD DAVIDSON, CHARLES E 820 PARISH ST PITTSBURGH, PA 15220	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addit
TITLE NAME	VD VER HULST, JAY R	☐ Delete	TITLE	Change ☐ Addit
STREET ADDRESS CITY-ST-ZIP	5900 ROCHE DR COLUMBUS, OH 43229		NAME STREET ADDRESS CITY-ST-ZIP	250 East Broad Street, Suite 600 Columbus, OH 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD : CASEY, DENNIS A 820 PARISH STREET PITTSBURGH, PA 15220	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi
TITLE NAME STREET ADDRESS CITY-ST-ZIP	11 11 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi
indicated	on this report or supplemental re poration or the receiver or trustee, or on an attachment with an acid	port is true and accurate and th	hat my signature shall hav	d in Section 119.07(3)(i), Florida Statutes, I further certify that the information we the same legal effect as if made under oath; that I am an officer or direct ter 607, Florida Statutes; and that my name appears in Block 10 or Block 1



#F9500000 4605

820 Parish Street • Pittsburgh, PA 15220 • (412) 922-2803 • FAX (412) 922-3071 www.mcoa.com

July 12, 2004

Division of Corporations P.O. Box 1500 Tallahassee, Fl 32302-1500

RE: MANAGED CARE OF AMERICA, INC.

2004 FOR PROFIT CORPORATION ANNUAL REPORT

F-95000004605

TO WHOM IT MAY CONCERN:

Enclosed please find our corporation's check # 34935 in the amount of \$158.75. This represents the \$150.00 filing fee plus an additional \$8.75 for a Certificate of Status.

Please note the attached For Profit Corporation Uniform Business Report (UBR) signed by our current Registered Agent; Corporation Service Company.

If you have any questions concerning this correspondence, please contact our office at your earliest convenience.

Very truly yours,

Lois M. Nagel

Secretary to Charles E. Davidson

LMN:

Enclosure

L.\LMK\WpDocs\WPDOCS\1010-001.EBC\TPA-LICENSE\Florida 2004 For Profit Corporation Annual Report Ltr. doc