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## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Mar 29, 2001 8:00 am DOCUMENT # F95000005637 **Secretary of State** COMPDENT PREFERRED NETWORKS, INC. 03-29-2001 90406 021 \*\*\*150.00 Principal Place of Business Mailing Address 100 MANSELL CT. EAST 85 NE LOOP 410 SUITE 603 KOGER ATRIUM BLDG C0039980 SUITE 400 SAN ANTONIO TX 78216 ROSWELL GA 30076 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 74-2552904 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code Fl 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PD CR2E034 (10/00) TITLE Delete TITLE KLOCK, PHYLLIS A NAME NAME 100 MANSELL CT. EAST, STE. 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ROSWELL GA 30076** TITLE Delete TITLE ☐ Change Addition MITCHELL, BRUCE A NAME NAME 100 MANSELL CT. EAST, STE. 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ROSWELL FL 30076 CITY-ST-ZIP JD . -- - - - Change -Addition TITLE -Delete TITLE YODER, KEITH J NAME NAME STREET ADDRESS 100 MANSELL CT. EAST, STE. 400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ROSWELL GA 30076** CCEO TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME KLOCK, DAVID R NAME 100 MANSELL CT. EAST, STE. 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **ROSEWELL GA 30076** CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE MITCHELL, BRUCE A NAME NAME 8800 ROSWELL RD, STE 295 STREET ADDRESS STREET ADDRESS CITY-ST-7IP ATLANTA GA 30350 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. I hereby 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

emm Bruce mitchel

3/20/01

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