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May 09 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000000706 (9)

1. Corporation Name

INTEGRATED PROVIDER NETWORKS, INC.

JAN 6 1997



Principal Place of Business

2828 CROASDAILE DR.  
DURHAM NC 27705

Mailing Address

2828 CROASDAILE DR.  
DURHAM NC 27705-2505

3. Date Incorporated or Qualified

02/09/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25 US

2a. Mailing Address

26 ATTENTION: TAX DEPARTMENT  
Suite, Apt. #, etc.

27 P. O. BOX 15309  
City & State

28 DURHAM, NC

29 Zip

27704

Country

30 US

4. FEI Number

56-1529325

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 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: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME DAUCHERT, EUGENE F JR  
STREET ADDRESS 2828 CROASDAILE DR.  
CITY-STATE-ZIP DURHAM NC 27705

☐ DELETE

TITLE VD  
NAME WHITAKER, GARY R MD  
STREET ADDRESS 2828 CROASDAILE DR.  
CITY-STATE-ZIP DURHAM NC 27705

☐ DELETE

TITLE VCOO  
NAME MOORE, CHARLES R  
STREET ADDRESS 2828 CROASDAILE DR.  
CITY-STATE-ZIP DURHAM NC 27705

☒ DELETE

TITLE ST  
NAME NEUGEBAUER, SHERYL A  
STREET ADDRESS 2828 CROASDAILE DR.  
CITY-STATE-ZIP DURHAM NC 27705

☒ DELETE

TITLE S  
NAME MILES, KIMBERLY J  
STREET ADDRESS 2828 CROASDAILE DR.  
CITY-STATE-ZIP DURHAM NC 27705

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

VP/CMD  
JACOBI, PETER, D. M.D.  
2828 CROASDAILE DRIVE  
DURHAM, NC 27705

14. I do 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANGELA M. SNEDEKER 4-25-97 (919) 383-0355

Date

Daytime Phone #

CR2E034 (9/96)

**ATTACHMENT  
1997 PROFIT CORPORATION  
ANNUAL REPORT  
STATE OF FLORIDA**

**INTEGRATED PROVIDER NETWORKS, INC  
FEIN: 56-1529325**

**ADDITIONAL OFFICERS AND DIRECTORS**

<b>TITLE</b>	<b>Secretary</b>
<b>NAME</b>	<b>Sally S. Lynch, CPA</b>
<b>STREET ADDRESS</b>	<b>2828 Croasdaile Drive</b>
<b>CITY-ST-ZIP</b>	<b>Durham, NC 27705</b>

<b>TITLE</b>	<b>Treasurer</b>
<b>NAME</b>	<b>Kerri M. Fritsch</b>
<b>STREET ADDRESS</b>	<b>2828 Croasdaile Drive</b>
<b>CITY-ST-ZIP</b>	<b>Durham, NC 27705</b>

<b>TITLE</b>	<b>Assistant Secretary / Assistant Treasurer</b>
<b>NAME</b>	<b>Angela M. Snedeker</b>
<b>STREET ADDRESS</b>	<b>2828 Croasdaile Drive</b>
<b>CITY-ST-ZIP</b>	<b>Durham, NC 27705</b>