# 2001 UNIFORM BUSINESS REPORT (UBR)

#### FILED May 04, 2001 8:00 am Secretary of State DGCUMENT # F96000002939 1. Entity Name TDI MANAGED CARE SERVICES, INC. 05-04-2001 90143 010 \*\*\*150.00 Principal Place of Business Mailing Address POB 10001 620 EPSILON DR PITTSBURGH PA 15238-2876 A/2-720 DALLAS TX 75301 HS 3. Mailing Address 2. Principal Place - ' " DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 🔾 🖊 Suite, Apt. #, etc. Applied For 4. FEI Number 51-0353040 C : R State City & State Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **C T CORPORATION SYSTEM** Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES/TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) Change TITLE Delete TITLE NAME NEWMAN, F A NAME STREET ADDRESS 8333 BRYAN DAIRY RD STREET ADDRESS CITY-ST-ZIP LARGO FL 33777 CITY-ST-ZIP ☐ Addition Channe TITLE ☐ Delete TITLE VAWRINEK, JEFFREY NAME NAME STREET ADDRESS 6501 LEGACY DR STREET ADDRESS CITY-ST-7IP **PLANO TX 75024** CITY-ST-ZIP Change ☐ Addition TITLE Delete Delete TITLE NAME NEWMAN, F A NAME 8333 BRYAN DAIRY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33777 ☐ Addition Change 🔀 Delete TITLE TITLE NAME WALSH, STEPHEN NAME STREET ADDRESS STREET ADDRESS 6501 LEGACY DR CITY-ST-ZIP CITY-ST-ZIP **PLANO TX 75024** ☐ Addition ☐ Change ☐ Delete TITLE TITLE LEWIS, R E NAME NAME 8333 BRYAN DAIRY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33777 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

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 of an attachment with an address, with all other like emplowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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# **Directors, Officers Report**

## TDI MANAGED CARE SERVICES, INC.

March 29, 2001

#F9600000 2934

### **DIRECTORS**

R. E. Lewis

Director

## **OFFICERS**

F. A. Marasco

D. J. Cuff

T. M. Nash R. E. Lewis

R. E. Lewis

¥ F. N. Napoli

D. J. Abramo

J. E. Hombosky

R. J. Kordella

L. D. McDonald

**★** M. P. Dastugue

₩ M. D. Porter

D. J. Milam

∦ J. J. Vawrinek

President

Senior Vice President, Human Resources

Senior Vice President, Real Estate

\_Vice President, General Counsel and Secretary

Vice President and Treasurer

Vice President, New Business Development

Vice President, Mail Service Operations

Vice President, Pharmacy Benefit Management Operations

Vice President, Marketing and Client Services of Eckerd Health Services

Assistant Treasurer

Assistant Treasurer

Assistant Treasurer and Assistant Secretary

**Assistant Secretary** 

## **BUSINESS ADDRESS FOR ABOVE:**

6501 LEGACY DRIVE PLANO, TX 75024-3698 All Otters:

1 - 33777-12

large FC 33777-1730