2000 UNIFORM BUSINESS REPORT (UBR)

6/12/0

FILED
Jul 07, 2000 8:00 am
Secretary of State
06-12-2000 90042 001 ***158.75

DOCUMENT # F97000002197

Entity Name
Sykes HealthPlan Service Bureau, Inc.

Principal Place of Business	Mailing Address
11405 Bluegrass Pkwy. Louisville, KY 40299	11405 Bluegrass Pkwy Louisville, KY 40299

[redacted]

Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 61-1169763 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Corporation Service Company 1201 Hays Street Tallahassee, FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TLE / AME / TREET ADDRESS / ITY-ST-ZIP	P/T Gannett, John D. 11405 Bluegrass Parkway Louisville, KY 40299 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TLE / AME / TREET ADDRESS / ITY-ST-ZIP	V/S Beckler, Christine L. 11405 Bluegrass Parkway Louisville, KY 40299 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TLE / AME / TREET ADDRESS / ITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TLE / AME / TREET ADDRESS / ITY-ST-ZIP	D Garner, David E. 11405 Bluegrass Parkway Louisville, KY 40299 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
ITLE / AME / TREET ADDRESS / ITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
ITLE / AME / TREET ADDRESS / ITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

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: _____ John D. Gannett, Jr. 5/17/00 (502) 267-3201
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Doc#F97000002191

307836

Sykes HealthPlan Service Bureau, Inc.

June 28, 2000

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: SHPS, Inc., reference number P97000107149, EIN 59-3484556; and
Sykes HealthPlan Service Bureau, Inc., reference number P97000002197, EIN 61-1169763

Dear Sir or Madam:

The purpose of this letter is to request a waiver of the $400 late filing fees for both SHPS, Inc., and Sykes HealthPlan Service Bureau, Inc.

Neither SHPS, Inc., nor Sykes HealthPlan Service Bureau, Inc., received their 2000 Uniform Business Report prior to the May 1, 2000 deadline. As shown by the attached letter, we requested the required forms from "yfisher" on May 9, 2000, and were told at that time that the late filing fee would not be imposed if a letter of explanation was sent with our completed reports. A copy of our letter of explanation is also attached.

Therefore, we respectfully request that you accept our original filing and remove the late filing fees of $391.25 from the accounts of both SHPS, Inc., and Sykes HealthPlan Service Bureau, Inc.

If you have any questions, please do not hesitate to contact me by calling (502) 267-3135, or by writing to the address shown below.

Sincerely,

David P. Haick

David P. Haick
General Counsel

enclosures

11405 Bluegrass Parkway • Louisville, Kentucky 40299 • (502) 267-3135 *fax* (502) 263-5680