

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90066 037 ***150.00

DOCUMENT # F98000001829

1. Corporation Name

CONCENTRA PREFERRED SYSTEMS, INC.



Principal Place of Business

5080 SPECTRUM DR., STE. 400 WEST
DALLAS TX 75248

Mailing Address

5080 SPECTRUM DR., STE. 400 WEST
DALLAS TX 75248

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/31/1998

4. FEI Number

36-3715258

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

ADDISON TX

Zip

24

75001

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

ADDISON, TX

Zip

29

75001

Country

30

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 DVT ☐ DELETE

NAME PESCE, JOSEPH F
STREET ADDRESS 5080 SPECTRUM DR., STE. 400 WEST
CITY-ST-ZIP DALLAS TX 75248

TITLE P ☒ DELETE

NAME NELSON, STEVEN E
STREET ADDRESS 5080 SPECTRUM DR., STE. 400 WEST
CITY-ST-ZIP DALLAS TX 75248

TITLE V ☐ DELETE

NAME GREENWOOD, JAMES M
STREET ADDRESS 5080 SPECTRUM DR., STE. 400 WEST
CITY-ST-ZIP DALLAS TX 75248

TITLE VS ☐ DELETE

NAME PARR, RICHARD A II
STREET ADDRESS 5080 SPECTRUM DR., STE. 400 WEST
CITY-ST-ZIP DALLAS TX 75248

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 312 UNION WHARF
1.4 CITY-ST-ZIP BOSTON MA 02109

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME DANIEL J. THOMAS
2.3 STREET ADDRESS 312 UNION WHARF
2.4 CITY-ST-ZIP BOSTON MA 02109

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ADDISON TX 75001

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ADDISON TX 75001

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VP & CONTROLLER 4.14.99

Date

781-290-5350

Daytime Phone #

CR2E034 (11/98)

0584480