

FILED
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Secretary of State

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2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

55045882

DOCUMENT # F98000003015			
1. Entity Name COORDINATED CARE SOLUTIONS, INC.			
Principal Place of Business 12301 NW 39TH ST. CORAL SPRINGS, FL 33065-2403		Mailing Address 12301 NW 39TH ST. CORAL SPRINGS, FL 33065-2403	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 52-1855439		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UNITED CORPORATE SERVICES, INC. 9200 SOUTH DADELAND BLVD. SUITE 608 MIAMI, FL 33166-0000			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE I, <u>THOMAS WILFONG</u> , President of <u>COORDINATED CARE SOLUTIONS, INC.</u> , do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.			
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			
TITLE	CD	NAME	WAXMAN, ALBERT
STREET ADDRESS	6266 AVENUE OF THE AMERICAS	CITY-ST-ZIP	NEW YORK, NY 10011
TITLE	PD	NAME	DOLLARD, VIRGINIA M
STREET ADDRESS	12301 NW 39TH ST.	CITY-ST-ZIP	CORAL SPRINGS, FL 330652403
TITLE	D	NAME	DAVIS, JORDAN S
STREET ADDRESS	1 ROCKEFELLER PLAZA STE 920	CITY-ST-ZIP	NY, NY 10020
TITLE	D	NAME	LEIHAN, LAWRENCE D
STREET ADDRESS	163 EAST 63RD ST 36TH FLOOR	CITY-ST-ZIP	NEW YORK, NY 10022
TITLE	D	NAME	THANGARAJ, IMMANUEL
STREET ADDRESS	190 SOUTH LASALLE ST STE 2800	CITY-ST-ZIP	CHICAGO, IL 60603
TITLE	VT	NAME	RYSTAL, CHARLES
STREET ADDRESS	12301 NW 39TH ST	CITY-ST-ZIP	CORAL SPRINGS, FL 330652403
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	AD/D	NAME	RICHARD WASSCH
STREET ADDRESS	12301 NW 39TH ST	CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	P/D	NAME	THOMAS WILFONG
STREET ADDRESS	12301 NW 39TH ST	CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	S/D	NAME	MARGO LIND
STREET ADDRESS	12301 NW 39TH ST	CITY-ST-ZIP	CORAL SPRINGS FL 33065
12. 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 207, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, without other like empowerment.			
SIGNATURE: <u>Thomas Wilfong</u>			