

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000006638

1. Entity Name

NATIONAL MEDICAL HEALTH CARD SYSTEMS, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90075 007 ***150.00

Principal Place of Business

Mailing Address

26 HARBOUR PARK DRIVE
PORT WASHINGTON NY 11050

26 HARBOUR PARK DRIVE
PORT WASHINGTON NY 11050-4602

2. Principal Place of Business

26 Harbor Park Drive

3. Mailing Address

26 Harbor Park Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Port Washington NY

City & State

Port Washington NY

Zip
11050

Country

Zip
11050

Country

4. FEI Number

11-2581812

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

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
PD	BRODSKY, BERT E	26 HARBOR PARK DRIVE	PORT WASHINGTON NY 11050	Chairman of the Board, CEO				<input checked="" type="checkbox"/>	<input type="checkbox"/>
EV	PORTNEY, LINDA	26 HARBOR PARK DRIVE	PORT WASHINGTON NY 11050	Executive VP of Operations				<input checked="" type="checkbox"/>	<input type="checkbox"/>
SDVC	SHAPIRO, GERALD	26 HARBOR PARK DRIVE	PORT WASHINGTON NY 11050	Vice Chairman, Secretary				<input checked="" type="checkbox"/>	<input type="checkbox"/>
T	DENARO, BARRY	26 HARBOR PARK DRIVE	PORT WASHINGTON NY 11050	Treasurer, CFO				<input checked="" type="checkbox"/>	<input type="checkbox"/>
EV	CASALE, MARY T	26 HARBOR PARK DRIVE	PORT WASHINGTON NY 11050	Executive VP of Sales + Marketing				<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	ANGOWITZ, GERALD T	1301 AVENUE OF THE AMERICAS	NEW YORK NY 10019	*SEE ATTACHED				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/2000

Date

Daytime Phone #

CR2E034 (9/99)

F98000006038

619144

National Medical Health Card Systems, Inc.

Additions to Officers/Directors

President & COO	Marjorie G. O'Malley	<u>26 Harbor Park Drive, Port Washington, NY 11050</u>
Vice President of Clinical Services	John Ciufo	<u>26 Harbor Park Drive, Port Washington, NY 11050</u>
Director	Kenneth J. Daly	<u>26 Harbor Park Drive, Port Washington, NY 11050</u>
Director	Richard J. Strauss, M.D., F.A.C.S.	<u>26 Harbor Park Drive, Port Washington, NY 11050</u>