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A ChoicePoint® Service

300 Phillips Blvd., Trenton, NJ 08618 or PO Box 8787, Trenton, NJ 08750 Tel: 609-883-7000 Fax: 609-883-7891

www.superiorinfo.com

State:

FL

Date:

December 20, 2006

To:

Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

From:

James Pearson

Re:

CCN Managed Care, Inc.

(Withdrawal Filing)

Enclosed herewith please find the necessary documents to withdrawal the above corporation in your state.

Please file upon receipt, returning a stamp filed copy of the document to my attention by regular mail in the self addressed, stamped envelope, or mail to:

Superior Information Services Inc.

PO Box 8787

Trenton, NJ 08650-0787

Attn: James Pearson

Should you need further information, or if there are any problems with the filing please contact me as soon as possible at (800) 848-0489, ext. 5420.

Thank you for your assistance in this matter.

TRANSMITTAL LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: CCN Managed Care, Inc.	
	f corporation)
(Name of	Corporation
DOCUMENT NUMBER: F99000002705	
The enclosed withdrawal application and fee	are submitted for filing.
Please return all correspondence concerning the matter to the following:	iis
B. April Brady	
	Name of Person)
Superior Information Services Inc.	
(Firm/Company)
300 Phillips Blvd.	
	(Address)
Trenton, NJ 08618	
	/State and Zip code)
()	1,
For further information concerning this matter	, please call:
B. April Brady	at (800) 432-8384 (ext. 5444)
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
409 E. Gaines St.	P.O. Box 6327
Tallahassee FI 32300	Tallahassee FI 32314

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

CCN Managed Care, Inc.
(Name of Corporation)
F99000002705 (Document Number of Corporation (if known)
F99000002705
(Document Number of Corporation (if known)
The state of the s
Delaware (Incorporated Under Laws of)
(incorporated Order Laws or)
This corporation is no longer transacting business or conducting affairs within the State of Florida and herel
voluntarily surrenders its authority to transact business or conduct affairs in Florida.
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf at
appoints the Department of State as its agent for service of process based on a cause of action arising during t
time it was authorized to transact business or conduct affairs in Florida.
The following is a current mailing address for the corporation:
c/o Coventry Health Care, Inc., 6705 Rockledge Dr.
(Mailing Address)
Bethesda, MD 20817
(City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
MOD A.
December 13, 2006
(Signature of a director, president or other officer - if in the hands of a recover or other court appointed fiduciary, by that fiduciary) (Date)
Shirley R. Smith Secretary
(Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35