

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F99000003932**

1. Entity Name

TRIZETTO APPLICATION SERVICES, INC.

FILED

00 MAY 17 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
567 SAN NICOLAS DR., #360 560 SAN NICOLAS DR., #360
NEWPORT BEACH, CA 92660 NEWPORT BEACH, CA 92660

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

84-1184722

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**SEE ATTACHED SCHEDULE I FOR CURRENT
LISTING OF OFFICERS AND DIRECTORS**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
200003267262--6
-05/25/00--01097--011
******558.75 ****558.75**

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP
SP

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:

D. Brian Karr

D. BRIAN KARR

5/15/00

949-719-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TREASURER

Date

Daytime Phone #

**Schedule I to
2000 Uniform Business Report
Florida Division of Corporations**

Corporation Name: TriZetto Application Services, Inc.

Item 12. Additions/Changes to Officers and Directors.

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Jeffrey H. Margolis	President, Chief Executive Officer, and Chairman; Director	567 San Nicolas Drive, Suite 360 Newport Beach, CA 92660
Michael J. Sunderland	Chief Financial Officer and Secretary; Director	567 San Nicolás Drive, Suite 360 Newport Beach, CA 92660
D. Brian Karr	Treasurer	567 San Nicolas Drive, Suite 360 Newport Beach, CA 92660
Christine A. Miller	Assistant Secretary	567 San Nicolas Drive, Suite 360 Newport Beach, CA 92660