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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G55367 1. Corporation Name

COST CONTAINMENT ADMINISTRATORS, INC.

Principal Place of Business		Mailing	Mailing Address					, 1 48 11111			1891 91911		15 15 15 15
6685 FOREST	HILL BLVD	6685 FC	6685 FOREST HILL BLVD										
SUITE 205		SUITE 2	SUITE 205					DO NOT INDITE WITH 10 CRACE					
GREENACRES FL 33413			GREENACRES FL 33413 US				<u> </u>	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
US								08/23/198	33	Qualifed		. , ,	_
2. Principal P	lace of Business	2a. Mai	ling Address				4.	FEI Number				<u> </u>	plied For
21		26						<u>59-23145</u>	<u>50</u>			 	t Applicable
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.				5.	5. Certificate of Status Desired See Required Fee Required					
City & State		City	City & State				6.	Election Can	npaign Fir	nancing		\$5.00	May Be
23		28						Trust Fund (Contributio	on	<u> </u>	Added	o Fees
Zip Country		Zip	Zip Country			8.	This corpora	tion owes	the curre	ent year in	tangible		
24	25	29		30				Personal Pro	· · ·			Yes	□No
	9. Name and Address of Co	urrent Registered	d Agent		<u> </u>		10.	Name and A	Address	of New R	egistered	Agent	
	ODEN CHARLES A				81	Name							
LINDGREN, CHARLES A			1 20 GF		82	Street A	Address (P.	O. Box Num	ber is No	t Accepta	ble)		
	S WINDSOR PARKE DRIVE		00 NW 38 St. -				,						
BOE	CA RATON FL-33496	(Lexing			83								
[Springs,	FL	84	City				· · · · · · · · · · · · · · · · · · ·		85 Zip	Code
}		330				. •			•		FL	- `	
office or n	to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the o	State of Florida. Si	uch change was a	authorize	d by 1	the corpor	corporation tration's bo	submits this ard of directo	statemer ors. I here	nt for the poble accept	purpose of t the appo	changing its intment as re	registered gistered
1 .	in lamiliar with, and accept the c	Digations of, ecc.	1011 007.0000; 1 10	maa ota	uios.				•				
SIĞNATURE	Signature, typed or printed name of registere	ed agent and title if applik	cable. (NOTI	E: Registere	d Agent	t signature rec	equired when re	instating)		٠.	DATE		
12.	OFFICER	S AND DIRECTO	RS	13.				DDITIONS/C	CHANGES	S TO OFF	ICERS A	ND DIRECTO	
TITLE &	PST	_	☐ DELETE	1.1 T	ITLE		_		774	~ De		Change	☐ Addition
NAME.	LINDGREN, CHARLES A			1.2 N	AME	1	824	\mathcal{M} in \mathcal{M}	38	yt	•	(-	ر
STREET ADDRESS	-5206 WINDSOR PARKE DI	RIVE /		1.3 S	TREET	ADDRESS	Λ	10.		(1	_	- N/a/	
CITY-ST-ZIP	BOCA RATON FL	(566	above)	1.4 C	ITY-ST	-ZIP	1 9 11		MAN	VU	3	3060	<u> </u>
TITLE	VP .		DELETE				COL O	T Obli	<u>, , , , , , , , , , , , , , , , , , , </u>	<u>, , </u>			ممنفناها فالما
NAME	LINDGREN, KATHERINE L		C) DELETE	2.1 1	ΠLE		COLO	r Obli)	<u> </u>		Change	Addition
	LINDONEN, NATHENINE L		C) DELETE	2.1 II 2.2 N			COLA	Dana Dana)	al	1011	Change	[_] Addition
STREET ADDRESS	5208 WINDSOR PARKE DI		_	2.2 N	AME	ADDRESS	COLO	Skne	B	- at	sove	Change	Addition
STREET ADDRESS CITY-ST-ZIP			above)	2.2 N 2.3 S	AME		Col a	s Spri	as	- ale	sive	<i></i>	Addition
	15208 WINDSOR PARKE DI		_	2.2 N 2.3 S	IAME TREET CITY-S		Colia	2 Spri	as	ale	sive	Change	☐ Addition
CITY-ST-ZIP	15208 WINDSOR PARKE DI		above)	2.2 N 2.3 S 2.4 C	TREET CITY-S'		Con a	Skne	as	- at	sve	<i></i>	
CITY-ST-ZIP	15208 WINDSOR PARKE DI		above)	2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N	IAME TREET CITY-S' TILE AME			My	ar	ok	5Ne	<i></i>	
CITY-ST-ZIP TITLE NAME	15208 WINDSOR PARKE DI		above)	2.2 N 2.3 S 2.4 C 3.1 Tl 3.2 N 3.3 S	IAME TREET CITY-S' TILE AME	T-ZIP ADDRESS		2 Spri	as	- ot	50VC	<i></i>	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	15208 WINDSOR PARKE DI		above)	2.2 N 2.3 S 2.4 C 3.1 Tl 3.2 N 3.3 S	TREET CITY-S' TILE AME TREET CITY-SI	T-ZIP ADDRESS	-	Jane Jane	as	- ok	5N-C	<i></i>	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	15208 WINDSOR PARKE DI		above)	2.2 N 2.3 S 2.4 C 3.1 Tl 3.2 N 3.3 S 3.4 C 4.1 T	TREET CITY-S' TILE AME TREET CITY-SI	T-ZIP ADDRESS	-	Hny	As	- ak	5Ne	Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	15208 WINDSOR PARKE DI		above)	22 N 23 S 2.4 C 3.1 Tl 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N	TREET CITY-S' TILE AME TREET CITY-SI TILE NAME	T-ZIP ADDRESS	-	Hny	As	- ot	sive	Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	15208 WINDSOR PARKE DI		above)	22 N 23 S 2.4 C 3.1 Ti 32 N 33 S 34 C 4.1 T 4.2 N 4.3 S	TREET CITY-S' TILE AME TREET CITY-SI TILE NAME	ADDRESS T-ZIP	-	Hny	as	· oto	sove	Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	15208 WINDSOR PARKE DI		above)	22 N 23 S 2.4 C 3.1 Ti 32 N 33 S 34 C 4.1 T 4.2 N 4.3 S	TREET CITY-S' TILE AME TREET CITY-SI TILE VAME TREET	ADDRESS T-ZIP	-	2 Spri	As	- at	sive	Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	15208 WINDSOR PARKE DI		above) DELETE	22 N 23 S 2.4 C 3.1 T 32 N 33 S 34. C 4.1 T 4.2 N 4.3 S 4.4 C	TREET CITY-S' TREE TREET CITY-SI TRE TREET TREET TREET TREET TREET TREET	ADDRESS T-ZIP	-	Hny	As	- at	sive	Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	15208 WINDSOR PARKE DI		above) DELETE	22N 23S 2.4C 3.1 Tl 32N 3.3 S 3.4.C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 Tl 5.2 N	TREET TREET TREET TREET TREET TREET TREET TREET TREET TITLE AME TREET TITLE AME	ADDRESS T-ZIP		Hny	as	- at	sive	Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	15208 WINDSOR PARKE DI		above) DELETE	22N 23S 2.4C 3.1Tl 32N 3.3S 3.4.C 4.1T 4.2N 4.3S 4.4C 5.1Tl 52N 5.3S	TREET TREET TREET TREET TREET TREET TREET TREET TREET TITLE AME TREET TITLE AME	T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Hny	As	- at	sove	Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	15208 WINDSOR PARKE DI		above) DELETE	22N 23S 2.4C 3.1Tl 32N 3.3S 3.4.C 4.1T 4.2N 4.3S 4.4C 5.1Tl 52N 5.3S	AME TREET TILE AME TREET TILE TREET TILE AME TREET TILE TREET TILE TREET TILE TREET	T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Hny	as .	- at	sove	Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	15208 WINDSOR PARKE DI		DELETE	22N 23S 24C 3.1 Tl 32N 3.3 S 3.4.C 4.1 T 4.2 P 4.3 S 4.4 C 5.1 Tl 52N 5.3 S 5.4 C	TREET CITY-S' TILE AME TREET TILE AME TREET TILE AME TREET TITY-ST TILE TREET TITY-ST TILE	T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Hny	As	- at	sove	Change Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	15208 WINDSOR PARKE DI		DELETE	22 N 23 S 2.4 C 3.1 Tl 3.2 N 3.3 S 3.4 .C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 Tl 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N	TREET CITY-S' TILE TREET CITY-S' TILE TREET TITLE	T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Ane	As	- at	sove	Change Change	Addition Addition

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:

561-432-1488