

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90172 022 ***158.75

DOCUMENT # J25733

1. Entity Name

FLORIDA HEALTH PLANS, INC.

Principal Place of Business

Mailing Address

**3030 N. ROCKY PT. DR. W. #750
 TAMPA FL 33607-5907**

**3030 N. ROCKY PT. DR. W. #750
 TAMPA FL 33607-5907**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2725016

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

**LAWRENCE, LEE
 3030 N. ROCKY PT. DR. W., #750
 TAMPA FL 33607**

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	STD	<input type="checkbox"/> Delete
NAME	STEIN, NORMDUR	
STREET ADDRESS	3100 E FLETCHER AVE	
CITY-ST-ZIP	TAMPA FL 33613	
TITLE	CD	<input type="checkbox"/> Delete
NAME	REES, RON R.	
STREET ADDRESS	1041 DUNL DOTON AVE #250	
CITY-ST-ZIP	PT ORANGE FL 32127	
TITLE	VC	<input type="checkbox"/> Delete
NAME	MEANS, MICHAEL D.	
STREET ADDRESS	8249 DEVEREUX DRIVE	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE	PD	<input type="checkbox"/> Delete
NAME	LAWRENCE, LEE	
STREET ADDRESS	3030 NORTH ROCKY POINT DRIVE WEST, #750	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HILL, ROBERT B.	
STREET ADDRESS	2815 SOUTH SEACREST BLVD	
CITY-ST-ZIP	BOYNTON BCH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GRADY, J ROBERT	
STREET ADDRESS	3030 N ROCKY PT DR W #750	
CITY-ST-ZIP	TAMPA FL 33607	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

See Attached

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:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/00

CR2E034 19/99

J25733
00087090

Florida Health Plans, Inc. Board of Directors

Chairman

Ron R. Rees
President & CEO
HALIFAX COMMUNITY HEALTH SYSTEM
1041 Dunlawton Avenue - #250
Port Orange, FL 32127
Phone (904) 322-4771
FAX (904) 322-4772

Chairman

Michael D. Means
President/CEO
HEALTH FIRST, INC.
8249 Devereux Drive
Melbourne, FL 32940-7955
Phone (407) 953-5650
FAX

President

Lee Lawrence
President
VHA OF FLORIDA, INC.
3030 North Rocky Point Drive West - #750
Tampa, FL 33607
Phone (813) 281-1080
FAX (813) 281-1173

Secretary/Treasurer

Norman V. Stein
President
UNIVERSITY COMMUNITY HOSPITAL, INC.
3100 East Fletcher Avenue
Tampa, FL 33613
Phone (813) 972-7203
FAX (813) 979-7313

James F. Vickery
President & CEO
BAPTIST HEALTH CARE
Post Office Box 17500
Pensacola, FL 32522
Phone (850) 469-2345
FAX (850) 434-4841

Ronald V. Wolff
President & CEO
BAY MEDICAL CENTER
615 North Bonita Avenue
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Phone (850) 747-6045
FAX (850) 763-8827

Robert B. Hill
President
BETHESDA HEALTHCARE SYSTEM
2815 South Seacrest Boulevard
Boynton Beach, FL 33435
Phone (561) 737-7733 Ext 4401
FAX (561) 737-4534