2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K38096

FILED Apr 30, 2004 Secretary of State

Entity Name: FLORIDA HEALTH PLAN MANAGEMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

3520 THOMASVILLE ROAD, SUITE 200 300 S PARK ROAD TALLAHASSEE, FL 32308 HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

3520 THOMASVILLE ROAD, SUITE 200 2828 CROASDAILE DRIVE TALLAHASSEE, FL 32308 DURHAM, NC 27705

FEI Number: 59-2977013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COHEN, GERALD M ESQUIRE

300 SOUTH PARK ROAD

HOLLYWOOD, FL 33021 US

WEGNER, ANITA S
300 S PARK ROAD
HOLLYWOOD, FL 33021 US

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: ANITA S WEGNER 04/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 SCOTT, STEVEN M M.D.
 Name:
 SCOTT, STEVEN M M.D.

 Address:
 3520 THOMASVILLE RD., STE. 200
 Address:
 300 S PARK ROAD

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:
 HOLLYWOOD, FL 33021

Title: AS () Delete Title: SVP (X) Change () Addition

Name: WEGNER, ANITA S Name: WEGNER, ANITA S

Address: 3520 THOMASVILLE RD., STE. 200 Address: 300 S PARK ROAD
City-St-Zip: TALLAHASSEE, FL City-St-Zip: HOLLYWOOD, FL 33021

Title: S () Delete Title: T (X) Change () Addition

Name: COHEN, GERALD M Name: KING, FELICIA P
Address: 300 SOUTH PARK ROAD
City-St-Zip: HOLLYWOOD, FL 33021

Name: KING, FELICIA P
Address: 300 SOUTH PARK ROAD
City-St-Zip: HOLLYWOOD, FL 33021

Title: D (X) Delete Title: () Change () Addition

 Name:
 BERDING, R. JOSEPH
 Name:

 Address:
 300 SOUTH PARK ROAD
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 HOGAN, J. MICHAEL M.D.
 Name:

 Address:
 300 SOUTH PARK ROAD
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 KING, FELICIA
 Name:

 Address:
 2828 CROASDAILE DR.
 Address:

 City-St-Zip:
 DURHAM, NC 27705
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN M SCOTT, MD PRES 04/30/2004