

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # K78774 (2)

1. Corporation Name

CAREFLORIDA HEALTH SYSTEMS, INC.

Principal Place of Business

7950 N.W. 53 ST.
MIAMI FL 33166

Mailing Address

Legal Department
3400 DATA DRIVE
RANCHO CORDOVA CA 95670
US



2. Principal Place of Business

21 Same
Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Same
Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/10/1989

3a. Date of Last Report

04/04/1995

4. FEI Number

65-0123170

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the filing officer

(NOTE: Registered Agent Signature required when relocating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
DCV	BENSON, KIRK A	3400 DATA DRIVE	RANCHO CORDOVA CA	<input type="checkbox"/>
DT	ELDER, JEFFREY L	3400 DATA DRIVE	RANCHO CORDOVA CA	<input type="checkbox"/>
DP	KRIES, LAWRENCE D	5950 N.W. 53RD ST., 3RD FLOOR	MIAMI FL	<input checked="" type="checkbox"/>
S	MARABITO, ALLEN J	3400 DATA DRIVE	RANCHO CORDOVA CA	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D				
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

DP Steven B. Griffin
5950 N.W. 53rd Street, 3rd Floor
Miami, FL 33166

AS Lisette Currier-Martinez
5950 N.W. 53rd Street, 3rd Floor
Miami, FL 33166

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey L. Elder, Chief Financial Officer

Date

4/10/96

Daytime Phone #

(916) 431-5000

CR2E034 (12/95)