FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1997

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

FILED
Mar 24 1997 8:00am
Secretary of State

DOCUMENT # **M13185** **(7)**

1. Corporation Name
COMMCARE HEALTH, INC.

Principal Place of Business
FDIC-100 COLONY SSQ. BOX 68
STE 2300
ATLANTA GA 30361
US

Mailing Address
FDIC-100 COLONY SSQ. BOX 68
STE 2300
ATLANTA GA 30301-0068
US

3. Date Incorporated or Qualified: 03/26/1985
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 1201 W. Peachtree ST,NE
Suite, Apt. #, etc.
22 Suite 1800
City & State
23 Atlanta, GA 30309-3415
Zip / Country
24 30309-3415 25 Fulton

2a. Mailing Address
26 1201 W. Peachtree ST,NE
Suite, Apt. #, etc.
27 Suite 1800
City & State
28 Atlanta, GA 30309-3415
Zip / Country
29 30309-3415 30 Fulton

4. FEI Number: 59-2530636 — 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 607.1538, 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 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DVAS	☐ DELETE
NAME	RAY, PATRICIA J	
STREET ADDRESS	FDIC-100 COLONY SSQ. BOX 68	
CITY-ST-ZIP	ATLANTA GA 30361	
TITLE	DP	☐ DELETE
NAME	CORRIGAN, RICHARD	
STREET ADDRESS	FDIC-100 COLONY SSQ. BOX 68	
CITY-ST-ZIP	ATLANTA GA 30361	
TITLE	VPAS	☐ DELETE
NAME	FARRELL, CHARLES P	
STREET ADDRESS	FDIC-100 COLONY SSQ. BOX 68	
CITY-ST-ZIP	ATLANTA GA 30361	
TITLE	VASD	☒ DELETE
NAME	HAACK, FAYE O.	
STREET ADDRESS	245 PEACHTREE CTR AVE. STE. 1100	
CITY-ST-ZIP	ATLANTA GA 30303	
TITLE	DST	☐ DELETE
NAME	ROSSETTI, JOHN P	
STREET ADDRESS	FDIC-100 COLONY SSQ. BOX 68	
CITY-ST-ZIP	ATLANTA GA 30361	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	FDIC-1201 W. Peachtreet ST, NE	
1.4 CITY-ST-ZIP	Atlanta, GA 30309-3415	
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	1201 W. Peachtree St, NE	
2.4 CITY-ST-ZIP	Atlanta, GA 30309-3415	
3.1 TITLE		☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS	1201 W. Peachtree ST, NE	
3.4 CITY-ST-ZIP	Atlanta, GA 30309-3415	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☒ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS	1201 W. Peachtree St, NE	
5.4 CITY-ST-ZIP	Atlanta, GA 30309-3415	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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.

SIGNATURE: 03/18/97 (404) 817-2567
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Patricia J. Ray, Vice President

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