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Apr 21 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N07123** (5)

1. Corporation Name

**HIP HEALTH PLAN OF FLORIDA, INC.**

Principal Place of Business

Mailing Address

**300 SOUTH PARK ROAD  
FOURTH FLOOR  
HOLLYWOOD FL 33021  
US**

**300 SOUTH PARK ROAD  
FOURTH FLOOR  
HOLLYWOOD FL 33021  
US**

3. Date Incorporated or Qualified

**01/14/1985**

4. FEI Number

**59-2552016**

Applied For  
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

5. Certificate of Status Desired

☒ **\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COHEN, GERALD M ESQ  
300 SOUTH PARK ROAD  
4TH FLOOR  
HOLLYWOOD FL 33021**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE ☐ DELETE  
NAME **DP**  
STREET ADDRESS **COHEN, STEVEN M**  
CITY-ST-ZIP **HIP - 300 S. PARK RD  
HOLLYWOOD FL 33021**

TITLE ☐ DELETE  
NAME **C**  
STREET ADDRESS **WATSON, ANTHONY L**  
CITY-ST-ZIP **HIP - 7 W 34TH ST  
NEW YORK NY 10010**

TITLE ☐ DELETE  
NAME **DVC**  
STREET ADDRESS **JOHNSTON, CHARLES**  
CITY-ST-ZIP **1301 N. HARRISON ST., STE 68  
PRINCETON NJ 08540-3512**

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **NEECK, BERNARD J**  
CITY-ST-ZIP **224 EDSALL TERR  
PEARL RIVER NY 10065**

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **PERRAUD, ROBERT D**  
CITY-ST-ZIP **7980 NW 4TH PL  
PLANTATION FL 33317**

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **SCARLATOS, PETER**  
CITY-ST-ZIP **25 CLIFF ST  
NEW YORK NY 10038**

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

**T**  
**PALEOS, MICHAEL K.**  
**HIP - 300 S. Park Road, Hollywood, FL 33021**

**S**  
**COHEN, GERALD M.**  
**HIP - 300 S. Park Road, Hollywood, FL 33021**

**D**  
**WICKS, VICTORIA**  
**HIP - 7 W. 34th St., New York, NY 10010**

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Steven M Cohen*

*4-9-98*

CR2E037 (10/97)