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Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000004527 (8)

1. Corporation Name

DISTRICT 1 COMMUNITY HEALTH PURCHASING ALLIANCE, INC.



Principal Place of Business 7282 PLANTATION RD. STE. 205 PENSACOLA FL 32504 US	Mailing Address 7282 PLANTATION RD. STE. 205 PENSACOLA FL 32504 US
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3. Date Incorporated or Qualified

10/05/1993

4. FEI Number

59-3212897

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TROCKI, DEBORAH
7282 PLANTATION RD.
STE. 205
PENSACOLA FL 32504**

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 617.002 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DOUGLAS, LORA	
STREET ADDRESS	P.O. BOX 999 N/A	
CITY - ST - ZIP	STARKE FL	
TITLE	C	<input type="checkbox"/> DELETE
NAME	BRUNER, MAXWELL J	
STREET ADDRESS	P. O. BOX 1845 N/A	
CITY - ST - ZIP	DESTIN FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	DUKESLL, JOHN	
STREET ADDRESS	2259 N.W. 16TH AVE.	
CITY - ST - ZIP	GAINESVILLE FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	GOLDENBERG, SAM	
STREET ADDRESS	P.O. BOX 12158 N/A	
CITY - ST - ZIP	PENSACOLA FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	COOK, JEANETTE I	
STREET ADDRESS	7638 N. HWY. 189	
CITY - ST - ZIP	BAKER FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ENTRY, CECILIA S	
STREET ADDRESS	8233 LI FAIR DR	
CITY - ST - ZIP	PENSACOLA FL 32506	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Vice Chair
2.3 STREET ADDRESS	Brunner, Maxwell
2.4 CITY - ST - ZIP	1007 Highway 98 E 32569
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Mary Esther, FL
3.3 STREET ADDRESS	Regular Board member
3.4 CITY - ST - ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Chairman
4.3 STREET ADDRESS	Goldenberg, Sam
4.4 CITY - ST - ZIP	705 Port Royal Way
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Treasurer
5.3 STREET ADDRESS	Cook, Jeanette
5.4 CITY - ST - ZIP	7638 N. Hwy 189
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Secretary
6.3 STREET ADDRESS	Hale, Bill
6.4 CITY - ST - ZIP	145 Parkwood Dr
	Deville, FL 32578

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:

Deborah Trocki

CR2E037 (10/97)

1998
CHPA DISTRICT 1
BOARD OF DIRECTORS

6 officers

JOE BRUNER, 1 st Vice Chair	VIANN HARDY, 2 nd Vice Chair
P O Box 1845 1007 Highway 98E 32569	1682B Metropolitan Circle
Destin, FL 32540	Tallahassee, FL 32308
OFFICE: (904) 837-8319	OFFICE: (904) 893-6818
FAX: (904) 837-1843	FAX: (904) 893-5379
(Governor Appointed)	(Board Appointed 12/11/96)
DOYLE CONNER	DONNA HAYES
385 N. Mulberry Street	P O Box 339/1960 N US 129
Monticello, Florida 32344	Bell, FL 32619
OFFICE: (850) 487-4428	OFFICE: (352) 463-2738
FAX: (850) 922-9444	FAX: (352) 463-7203
(Board Appointed 3/11/97)	(Board Appointed 12/11/96)
JEANETTE COOK, Treasurer	BRENDA HENDRICKS
7638 North Highway 189	City of Parker
Baker, FL 32531	1001 W. Park Street
OFFICE: (904) 689-7273	Parker, FL 32404
FAX: (904) 689-7129	OFFICE: (904) 871-4104 FAX: (904) 871-6684
(Governor Appointed)	(Senate Appointed)
JOHN DUKES, III	HELEN INGRAM
2259 Northwest 16th Avenue	904 Second Court
Gainesville, FL 32605	Panama City, FL 32401
OFFICE: (352) 371-4203	HOME: (904) 763-3012
FAX: (352) 371-4203	
(Governor Appointed)	(Senate Appointed)

