FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 24 PM 12:35

DOCUMENT # **N93000004532 (8)**

1. Corporation Name

DISTRICT 5 COMMUNITY HEALTH PURCHASING ALLIANCE, INC.

Principal Place of Business	Mailing Address
% DONALD R CRANE, JR ONE PROGRESS PL #420 ST PETERSBURG FL 33701 US	% DONALD R CRANE, JR ONE PROGRESS PL #420 ST PETERSBURG FL 33701 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/05/1993
3a. Date of Last Report: 03/18/1994
4. FEI Number: 59-3216600 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Richard W. Neiser, E.D.	26 Richard W. Neiser, E.D.
Suite, Apt. #, etc. 22 2240 Belleair Rd.,#180	Suite, Apt. #, etc. 27 2240 Belleair Rd.,#180
City & State 23 Clearwater, FL	City & State 28 Clearwater, FL
Zip / Country 24 34624 / 25 Pinellas	Zip / Country 29 34624 / 30 Pinellas

9. Name and Address of Current Registered Agent

LEWIS, HAROLD D
AGENCY FOR HEALTH CARE ADMINISTRATION
325 JOHN KNOX RD., SUITE 301, THE ATRIUM
TALLAHASSEE FL 32303

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	BEDINGHAUS, PAUL J	12 NAME	
STREET ADDRESS	5245 CENTRAL AVE	13 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33710	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	GIBLIN, CHRIS H	22 NAME	
STREET ADDRESS	925 31ST TERRACE NE	23 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	BROWN, LOUIS D	32 NAME	
STREET ADDRESS	3767 30TH AVE, SO.	33 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33711	34 CITY-ST-ZIP	
TITLE	TD	41 TITLE	☒ Change ☐ Addition
NAME	BURMASTER, PAMELA J	42 NAME	LEAGUE, PAMELA J.
STREET ADDRESS	P.O. BOX 14042 N/A	43 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	D ☒ Change ☐ Addition
NAME	CASTELLANOS, GERALD R	52 NAME	FOLEY, MICHAEL T.
STREET ADDRESS	P.O. BOX 1729 N/A	53 STREET ADDRESS	P.O. Box 1345(N/A)
CITY-ST-ZIP	CLEARWATER FL 34616	54 CITY-ST-ZIP	Largo, FL 34649
TITLE	D	61 TITLE	CD ☒ Change ☐ Addition
NAME	CRANE, DONALD J	62 NAME	
STREET ADDRESS	4020-12TH ST NO.	63 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33703	64 CITY-ST-ZIP	

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

SIGNATURE: Donald Bedinghaus, Director — April 27, 1995 — 813-535-0000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0014493