FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # N93000004532 (8)

1. Corporation Name

DISTRICT 5 COMMUNITY HEALTH PURCHASING ALLIANCE, INC.

Principal Place of Business	Mailing Address
RICHARD W NEISER ED 2240 BELLEAIR RD 180 CLEARWATER FL 34624 US	RICHARD W NEISER ED 2240 BELLAIR RD 180 CLEARWATER FL 34624 US

3. Date Incorporated or Qualified: 10/05/1993
3a. Date of Last Report: 05/24/1995

2. Principal Place of Business	2a. Mailing Address
21 Pamela J. League, ED	26 Pamela J. League, ED
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

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

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

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 prov... Section ...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, in the ... Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and ... 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature(s) typed or printed / Director, agent and officer as applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEDINGHAUS, PAUL J 5245 CENTRAL AVE ST. PETERSBURG FL 33710	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	S/T Rees, Joan 5242 Main St. New Port Richey, FL 34652	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GIBLIN, CHRIS H 925 31ST TERRACE NE ST PETERSBURG FL	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROWN, LOUIS D 3767 30TH AVE, SO. ST. PETERSBURG FL 33711	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LEAGUE, PAMELA J P.O. BOX 14042 N/A ST. PETERSBURG FL	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	D Parks, Sallie 315 Court Street Clearwater, FL 34616	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOLEY, MICHAEL T P O BOX 1345 LARGO FL	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD CRANE, DONALD J 4020-12TH ST NO. ST. PETERSBURG FL	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

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: Pamela J. League — January 19, 1996 — 1-813-535-0000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Neal E. Evans