

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # N93000004533 (6)

95 APR 12 PM 12:15

1. Corporation Name

DISTRICT 6 COMMUNITY HEALTH PURCHASING ALLIANCE, INC.

Principal Place of Business

Mailing Address

710 OAKFIELD DR
 SUITE 224
 BRANDON FL 33511
 US

710 OAKFIELD DR
 SUITE 224
 BRANDON FL 33511
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

10/05/1993

03/18/1994

4. FEI Number

Applied For

59-3220303

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LACKMAN, GEORGE E
 FIRST UNION BANK
 100 S ASHLEY DRIVE, SUITE 1000
 TAMPA FL 33602

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

George E. Lackman

4-6-95

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 12

TITLE

D

NAME

BARBEN, ROBERT J

STREET ADDRESS

P.O. BOX 1056 N/A

CITY - ST - ZIP

AVON PARK FL 33825

TITLE

D

NAME

BENNETT, MICHAEL S

STREET ADDRESS

7011-301 BLVD.

CITY - ST - ZIP

SARASOTA FL 34243

TITLE

D

NAME

BLACK, RONALD J

STREET ADDRESS

1083 NORMANDY TRACE RD

CITY - ST - ZIP

TAMPA FL 33602

TITLE

D

NAME

BURKE, MARTHA R

STREET ADDRESS

P.O. BOX 2927 N/A

CITY - ST - ZIP

WINTER HAVEN FL 33883

TITLE

D

NAME

CREWS, JERALDNE F

STREET ADDRESS

P.O. BOX 248 N/A

CITY - ST - ZIP

WAUCHULA FL 33873

TITLE

D

NAME

FISHER, HERBERT R

STREET ADDRESS

3801 W KENNEDY BLVD., S-F

CITY - ST - ZIP

TAMPA FL 33609

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

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Burke, Martha R.
 Resigned position

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 this 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 unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George E. Lackman

4/6/95

813-689-8646

Chen

Chen



N9360000 415 33

CHPA District 6 • 710 Oakfield Dr., Suite 224 • Brandon, Florida 33511
Enrollment (800) 4MY-CHPA • CHPA Office (813) 689-8646 • CHPA Fax (813) 661-8675

District 6 Community Health Purchasing Alliance, Inc.

Document N93000004533(6)

Continuation of Block 6 - Officers and Directors

- | | | | |
|---|--|---|---|
| D | Haugabook, Earl
1407 Shell Flower Drive
Brandon, FL 33511 | D | Stewart, Frank S.
3560 North 29th Street
Tampa, FL 33605 |
| D | Lackman, George E.
17906 Simms Road
Odessa, FL 33556 | D | Tillis, Mary L.
3101 9th Ave. Drive East
Palmetto, FL 34221 |
| D | Little, Susan M.
1252 Lake Point Drive
Lakeland, FL 33813 | | |
| D | McKown, Bobby F.
PO Box 89 N/A
Lakeland, FL 33802-0089 | | |
| D | Mickler, Malcolm P.
PO Box 441 N/A
Tampa, FL 33601-0441 | | |
| D | Reyes, Mena
4506 W. Dale Ave.
Tampa, FL 33609 | | |
| D | Sahlman, Charles W.
1601 Sahlman Drive
Tampa, FL 33605 | | |
| D | Satchel, Frank R.
806 Southeast Third St.
Mulberry, FL 33860 | | |