

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90004 033 \*\*\*\*61.25

**DOCUMENT # N93000004534**

1. Entity Name

**CONSOLIDATED COMMUNITY HEALTH PURCHASING ALLIANCE**

Principal Place of Business

4203 VINELAND RD  
 K-14  
 ORLANDO FL 32811  
 US

Mailing Address

4203 VINELAND ROAD  
 SUITE K-14  
 ORLANDO FL 32811  
 US

2. Principal Place of Business

4605 L.B. McLeod Rd

Suite, Apt. #, etc.

Suite 100

City & State

Zip

Country

3. Mailing Address

4605 L.B. McLeod Rd

Suite, Apt. #, etc.

Suite 100

City & State

Zip

Country

4. FEI Number

59-3219935

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

DUNN, EDGAR  
 347 S RIDGEWOOD AVE  
 DAYTONA BEACH FL 32114

7. Name and Address of New Registered Agent

Name

McCarrie, Terry W.

Street Address (P.O. Box Number is Not Acceptable)

4605 L.B. McLeod Rd.

Suite 100

City

Orlando

FL

Zip Code

32811

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4/17/01

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BALK, DAVID	
STREET ADDRESS	5600 SANDLAKE ROAD, MAILPOINT 607	
CITY-ST-ZIP	ORLANDO FL 32819	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	REIKER, JON	
STREET ADDRESS	5900 LK. ELLENOR DR.	
CITY-ST-ZIP	ORLANDO FL 32809	
TITLE	D	<input type="checkbox"/> Delete
NAME	FEE, ROGER L	
STREET ADDRESS	390 N ORANGE AVE., S-700	
CITY-ST-ZIP	ORLANDO FL 32802	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SCOTT, JERRY	
STREET ADDRESS	116 FOREST AVE	
CITY-ST-ZIP	COCOA FL 32922	
TITLE	D	<input type="checkbox"/> Delete
NAME	SWANN, CHRISTIAN	
STREET ADDRESS	1031 W. MORSE BLVD., STE. 270	
CITY-ST-ZIP	WINTER PARK FL 32802	
TITLE	D	<input type="checkbox"/> Delete
NAME	BAILEY, T W	
STREET ADDRESS	600 N SALISBURY ST	
CITY-ST-ZIP	DELAND FL 32720	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Barley, Wayne	
STREET ADDRESS	600 N. Salsbury St.	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Collins, Jack	
STREET ADDRESS	4345 Southport Blvd.	
CITY-ST-ZIP	JACKSONVILLE, FL 32216	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hanson, John	
STREET ADDRESS	445 W. Amelia St.	
CITY-ST-ZIP	ORLANDO FL 32801	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Perry, Adrienne	
STREET ADDRESS	281 Rangeline Road	
CITY-ST-ZIP	Longwood, FL 32750	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Randell, Marshall	
STREET ADDRESS	645 Caiman St.	
CITY-ST-ZIP	SATELLITE BEACH, FL 32937	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas, Janie	
STREET ADDRESS	4272 Nassau River Rd.	
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Terry W. McCarrie 4/17/01 407-629-1173

CR2E037 (10/00)