

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000004609

1. Corporation Name

CASE MANAGEMENT SOCIETY OF TAMPA BAY, INC.

Principal Place of Business

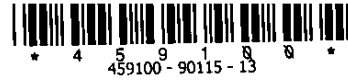
8362 PINES BLVD #184
PEMBROKE PINES FL 33024

Mailing Address

8362 PINES BLVD #184
PEMBROKE PINES FL 33024

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90115 013 ****61.25



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		09/03/1996	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		65-0631221	
24 Country		29 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

LOGAN, RICKI S
8362 PINES BLVD
184
PEMBROKE PINES FL 33024 33024

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 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, 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

Ricki S. Logan

Ricki S. LOGAN

4/22/99

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	DPE	1.1 TITLE	M
NAME	SHUMATE, ARTHUR	1.2 NAME	RICKI LOGAN
STREET ADDRESS	3030 6TH ST S	1.3 STREET ADDRESS	8362 PINES BLVD #184
CITY-ST-ZIP	ST. PETERSBURG FL 33705	1.4 CITY-ST-ZIP	PEMBROKE PINES, FL 33024
TITLE	DP	2.1 TITLE	D
NAME	LITZENBERGER, PINA	2.2 NAME	DIANNE MILLER
STREET ADDRESS	11401 9TH ST N	2.3 STREET ADDRESS	10062 HUNTINGTON FOREST BLVD.
CITY-ST-ZIP	PALM HARBOR FL 33705	2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32257
TITLE	TD	3.1 TITLE	
NAME	BUNDROCK, GENE	3.2 NAME	
STREET ADDRESS	12312 92ND ST N	3.3 STREET ADDRESS	
CITY-ST-ZIP	LARGO FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	SARGENT, DIANE	4.2 NAME	
STREET ADDRESS	14331 60TH ST N	4.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34620	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE:

Ricki S. Logan RICKI S. LOGAN

4/22/99 954-435-9669

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)