

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091428

FILED  
Jan 08, 2004  
Secretary of State

Entity Name: IMPERIAL HEALTH PLANS, INC.

## Current Principal Place of Business:

1601 EAST BAY DRIVE  
#3A  
LARGO, FL 33771

## New Principal Place of Business:

## Current Mailing Address:

1601 EAST BAY DRIVE  
#3A  
LARGO, FL 33771

## New Mailing Address:

FEI Number: 65-1037513

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GILBERT, DANLENE  
1601 EAST BAY DRIVE  
#3A  
LARGO, FL 33771

## Name and Address of New Registered Agent:

GILBERT, GLENN  
1601 EAST BAY DRIVE  
#3A  
LARGO, FL 33771

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: GLENN GILBERT

01/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO (X) Delete  
Name: GILBERT, DANLENE  
Address: 1601 EAST BAY DRIVE, #3A  
City-St-Zip: LARGO, FL 33771

Title: P ( ) Delete  
Name: GILBERT, GLENN  
Address: 1601 EAST BAY DRIVE, #3A  
City-St-Zip: LARGO, FL 33771

Title: CMOS ( ) Delete  
Name: WANNAMAKER, LISA DO  
Address: 1601 EAST BAY DRIVE, #3A  
City-St-Zip: LARGO, FL 33771

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: GILBERT, GLENN D  
Address: 1601 EAST BAY DRIVE, #3A  
City-St-Zip: LARGO, FL 33771

Title: VP (X) Change ( ) Addition  
Name: MALATESTA, ALBERT  
Address: 1601 EAST BAY DRIVE, 3A  
City-St-Zip: LARGO, FL 33771

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN D. GILBERT

P

01/08/2004

Electronic Signature of Signing Officer or Director

Date