

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000097892

FILED
Jan 19, 2004
Secretary of State

Entity Name: CAREMED HEALTH CORPORATION

Current Principal Place of Business:

3501 HEALTH CENTER BOULEVARD
SUITE 1200
BONITA SPRINGS, FL 34130

Current Mailing Address:

3501 HEALTH CENTER BOULEVARD
SUITE 1200
BONITA SPRINGS, FL 34130

New Principal Place of Business:

3501 HEALTH CENTER BOULEVARD
SUITE 1200
BONITA SPRINGS, FL 34135

New Mailing Address:

3501 HEALTH CENTER BOULEVARD
SUITE 1200
BONITA SPRINGS, FL 34135

FEI Number: 59-3677342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEIM, ROSCOE D
760 WIGGINS LAKE DRIVE #206
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

HEIM, ROSCOE D
3480 MORNING LAKE DRIVE
#202
BONITA SPRINGS, FL 34134 US

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:

01/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: HEIM, ROSCOE D
Address: 760 WIGGINS LAKE DRIVE #206
City-St-Zip: NAPLES, FL 34110

Title: VTD () Delete
Name: WARD, JOHN
Address: 22791 SNAPTAIL CT
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: HEIM, ROSCOE D
Address: 3480 MORNING LAKE DRIVE #202
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VTD (X) Change () Addition
Name: WARD, JOHN C
Address: 22791 SNAPTAIL CT
City-St-Zip: ESTERO, FL 33928

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: ROSCOE D. HEIM

PRES

01/19/2004

Electronic Signature of Signing Officer or Director

Date