

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P26423

1. Corporation Name

PHP Healthcare Corporation
11440 Commerce Park Drive
Reston, VA 22091

Principal Place of Business

11440 Commerce Park Dr.
Reston, VA 22091

Mailing Address

11440 Commerce Park Dr.
Reston, VA 22091

3. Date Incorporated or Qualified
10/12/89

3a. Date of Last Report
4/21/95

4. FEI Number

54-1023168

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt # etc

26 Suite Apt # etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT Corporation System
1200 S. Pine Island Road
Plantation, FL 33324

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

Signature of registered person or registered agent and the corporation

Signature of person appointed registered agent when registering

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Chairman & CEO, Director
NAME Robbins, Charles H.
STREET ADDRESS 11440 Commerce Park Drive
CITY ST ZIP Reston, VA 22091

11 TITLE Director
NAME Mathews, Joseph G.
STREET ADDRESS 1000 Lake St. Louis Blvd., Suite 224
CITY ST ZIP Lake St. Louis, MO 63367

11 TITLE Mazur, Jack M.
NAME President, Director
STREET ADDRESS 11440 Commerce Park Drive
CITY ST ZIP Reston, VA 22091

11 TITLE Director
NAME Reilly, Charles
STREET ADDRESS 2049 Century Park E., Suite 3330
CITY ST ZIP Los Angeles, CA 90067

11 TITLE Senior Exec. V.P., Director
NAME Starr, Michael D.
STREET ADDRESS 11440 Commerce Park Drive
CITY ST ZIP Reston, VA 22091

11 TITLE Director
NAME Ruffing, Donald J.
STREET ADDRESS 11104 Woodlawn Blvd.
CITY ST ZIP Upper Marlboro, MD 20772

11 TITLE Senior V.P., Director
NAME Lavoie, Julien J.
STREET ADDRESS 11440 Commerce Park Drive
CITY ST ZIP Reston, VA 22091

11 TITLE Director
NAME
STREET ADDRESS
CITY ST ZIP

11 TITLE Senior V.P., Director
NAME Schafer, George E., M.D.
STREET ADDRESS 4 Imperial Oaks
CITY ST ZIP San Antonio, TX 78248

11 TITLE Director
NAME
STREET ADDRESS
CITY ST ZIP

11 TITLE Director
NAME Cuzmanes, Paul T.
STREET ADDRESS 250 West Pratt Street
CITY ST ZIP Baltimore, MD 21201

11 TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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 and be 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 687, Florida Statutes, and that my name appears in Block 12 or Block 13 (changes) or on an attachment with an address.

SIGNATURE:

Michael D. Starr

Michael D. Starr

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96

(703) 758-3600

Date

Day/Phone #

CR2E034 (12/95)