## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 12, 1999 8:00 am Secretary of State

05-12-1999 90008 012 \*\*\*150.00

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DOCUMENT	#	P27014
Constanting Manager		

CLAIM SERVICES RESOURCE GROUP, NC.

Principal Place	of Business	Mailing Address				1 19911001 119 11811 10071 00101 11		411	2.0
12377 MERIT DR 12377 MER		12377 MERIT OR	MERIT OR						
SUITE 1800		SUITE 1800				DO NOT WRI	TE IN THIS	SPACE	
DALLAS TX 752 US	51	DALLAS TX 75251 US			<del>  ,</del>	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed			
03		00			ĺ	11/17/1989			. [
2 Principal Pl	ace of Business	2a. Mailing Address				1			oplied For
·	ace of Busiliess	26			1	75-2011854		<u> </u>	lot Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.							Additional
22	m, 0.00.	27			١ :	5. Certifcate of Status Desired			Required
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Country			B. This corporation owes the curr	rent year Inta	ngible	3/
24	25	29 30	ו			Personal Property Tax.	•	☐Yes	×Νο
	9. Name and Address of Current	Registered Agent			10	0. Name and Address of New 1	Registered A	gent	
			81	Name	•				
CT C	ORPORATION SYSTEM		82	Street	t Addrage	(P.O. Box Number is Not Accept	ahle)		
	S. PINE ISLAND ROAD		02	0.000	. /100/635	( DON HUMBER TO HOLLHOCEPT			
PLAN	ITATION FL 33324		83						
			0.4	0.14	<del></del>			gel Zin	Code
			84	City			FL	85  Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named	d corporati	on submits this statement for the	purpose of	hanging it	ts registered
office or t	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auth	orized by	the corp	poration's	board of directors. I hereby acce	pt the appoin	tment as I	registered
SIGNATURE							DATE		
	Signature, typed or printed name of registered agent		gistered Age 13.	nt signature	e required when	ADDITIONS/CHANGES TO OF		DIRECT	ORS IN 12
12.	OFFICERS AND	DELETE	1,1 TITLE		7	ABBITIONO OTRATOLO TO OT	11021101111	☐ Change	
TITLE	, <del>-</del>	<u> </u>	12 NAME					_ "	_
NAME	PATTERSON, DIANNE								
STREET ADDRESS	12377 MERIT DR SUITE 1800	j		T ADDRESS	°]				}
CITY-ST-ZIP	DALLAS TX	DELETE	1.4 CITY-S 2.1 TITLE	1-ZIP	<u> </u>			Change	Addition
TITLE	VD	- Deceie						[_] onenge	
NAME	PATTERSON, JAMES D.		2.2 NAME						ļ
STREET ADDRESS	12377 MERIT DR SUITE 1800			TADDRESS	S				Ì
CITY-ST-ZIP	DALLAS TX	□ DELETE	2. 4 CITY-	ST-ZIP	<del></del>			Change	Addition
TITLE	SDV	☐ DELETE	3.1 TITLE					J Change	,, Addition
NAME	PATTERSON, JAMES D		3.2 NAME						
STREET ADDRESS	12377 MERIT DR STE 1800			TADDRESS	s				
CITY-ST-ZIP	DALLAS TX 75251	[7] wevere	3.4. CITY-	ST-ZIP	<del> </del>			Change	e
TITLE	CFOV	☐ DELETE	4.1 TITLE					_] ∪nange	, Madinati
NAME	FARRAGUT, PHYLLIS		4. 2 NAME						ļ
STREET ADDRESS	12377 MERIT DRIVE SUITE 1800		4.3 STREE	TADDRESS	S				
CrTY-ST-ZIP	DALLAS TE		4.4 CITY- 5	T-ZIP				F3.01	FT A LEVI
TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME	See Attack		5.2 NAME						
STREET ADDRESS	) JEENINGO	754	5.3 STREE	TADDRESS	S				1
CITY-\$T-ZIP			5.4 CITY-S	T-Z <del>I</del> P	<b>_</b>			<u></u>	<u>_</u>
TITLE		☐ DELETÉ	6.1 TITLE					[] Change	Addition
NAME			6.2 NAME		1				1
STREET ADDRESS			6.3 STREE	T ADDRESS	s				

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 607, 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: 🔾

ANITA BANSMON, AVP/CONTROLLER 1-29.99

DOC#P27014

## CLAIM SERVICES RESOURCE GROUP, INC. OFFICERS, DIRECTORS AND STOCKHOLDERS

	<del></del>
12377 Merit Drive, Suite 1800	6724 Regalbluff Dr.
Dallas, TX 75251	Dallas, TX 75248
12377 Merit Drive, Suite 1800	6724 Regalbluff Dr.
Dallas, TX 75251	Dallas, TX 75248
1	
12377 Merit Drive, Suite 1800	201 Breaker Ln.
Dallas, TX 75251	Flower Mound, TX 75028
12277 Morit Drive, Suite 1900	5616 Crowndale Dr.
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Dallas, IX 75251	Plano, TX 75093
12377 Merit Drive, Suite 1800	2809 Prestonwood Dr.
Dallas, TX 75251	Plano, TX 75093
12377 Merit Drive, Suite 1800	18925 Baythorn Way
Dallas, TX 75251	Brookfield, WI 53045
12377 Merit Orive Suite 1800	16211 Dalmalley
	Dallas, TX 75248
Dallas, TX 75251	Dallas, TX 75240
12377 Merit Drive, Suite 1800	2340 Normandy Cr.
Dallas, TX 75251	Livermore, CA 94550
12377 Merit Drive, Suite 1800	1908 Hidden Trail Dr.
Dallas, TX 75251	Lewisville, TX 75067
	Dallas, TX 75251  12377 Merit Drive, Suite 1800 Dallas, TX 75251