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Apr 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000011329 (5)

1. Corporation Name

BEACON HEALTH PLANS, INC.

Principal Place of Business

760 N.W. 107TH AVENUE
MIAMI FL 33172

Mailing Address

760 N.W. 107TH AVENUE
MIAMI FL 33172-3162



3. Date Incorporated or Qualified

01/31/1996

3a. Date of Last Report

N/A

2. Principal Place of Business

2a. Mailing Address

21 2511 Ponce De Leon Blvd

26 2511 Ponce De Leon Blvd

4. FEI Number

65-0660578

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23 5th Floor

27 5th Floor

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

24 City & State

28 City & State

Trust Fund Contribution

☐

23 Coral Gables, FL

28 Coral Gables, FL

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

24 Zip

25 Country

29 Zip

30 Country

24 33134

25 USA

29 33134

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COBER CORPORATE AGENTS, INC.
2801 SOUTH BAYSHORE DRIVE
19TH FLOOR
MIAMI FL 33133

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 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

D

☐ DELETE

NAME
NOONAN, RAYMOND E
STREET ADDRESS
760 N.W. 107TH AVENUE, SUITE 208
CITY-ST-ZIP
MIAMI FL 33172

1.1 TITLE

Chief Executive Officer

☒ Change

☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

1.2 NAME

Raymond E. Noonan
2511 Ponce De Leon Blvd, 5th FL
Coral Gables, FL 33134

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE

Chief Financial Officer

☐ Change

☒ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

2.2 NAME

Frank L. Young
2511 Ponce De Leon Blvd, 5th FL
Coral Gables, FL 33134

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

Vice President of Operations

☐ Change

☒ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

3.2 NAME

Nestor J. Plana
2511 Ponce De Leon Blvd, 5th FL
Coral Gables, FL 33134

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

Vice President of Marketing

☐ Change

☒ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

4.2 NAME

Ana M. Berenguer
2511 Ponce De Leon Blvd, 5th FL
Coral Gables, FL 33134

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank L. Young 3/28/97 (305) 774-2593

Date

Daytime Phone #

0232085

CR2 F034 (9/96)