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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT

Sandra B. Mort

Secretary of Sta DIVISION OF CORPOR TIONS

DOCUMENT # **P96000038437** (5)

COMPUCARE TECHNICAL SERVICES, INC.

FILED Apr 16 1997 8:00am Secretary of State



Eurocaban Eu	Control and Thomas Services	Marillana, Antologo				-)	OBIOS HINI ANII GIRDO	NIN IEDI IEDI
	iace of Business	Mailing Address						
1652 EMERS JACKSONVIL	ion 81. Le fl 32207		1652 EMERSON ST. Jacksonville fl. 32207-8104					
						3. Date Incorporated or Qualified 05/03/1996	3a. Date of La	st Report
2. Principa	al Flace of Busness	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-3376201		Not Applicable
Suite, A	pt #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	7	5 Additional Required
City & S	State	City & State				Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Ζιρ	Cou	intry		8. This corporation has liability for i	ntangible tax und	er s. 199.032,
24	25	29	30				Yes No	
	9. Name and Address of Curro	ent Registered Agent				10. Name and Address of New Re	gistered Agent	
MCALISTER, STEVEN M 1852 EMERSON ST: 5209 SA			81 Name		Name			
		SAN JOSE BO	SAN JOSE BLUD, 82 Swite 202		Street Address (P.O. Box Number is Not Acceptable)			
JA	ACKSONVILLE FL 32207	Swite	SoS	83				
				03				
				84	City		FL 85	Zip Code
	10, 5, 607.07	00 1 007 4500 Ft- 1-1- 0-		Щ.				
office (or registered agent, or both, in the Stat	te of Florida. Such change w	acutes, trie at as authorized	d by th	ne corporati	oration submits this statement for the pon's board of directors. I hereby accep	t the appointment	as registered
agent	I am familiar with, and accept the obli	gations of Section 607.0505	5, Florida Stat	utes.	·			
SIGNATUR	RE Sipilature, typed or parelod name of registered a	and sed in the pool of the	INOTE Designed	d Anout	ninest ve son de	ed when reinstating)	DATE	
12.	The second secon	ND DIRECTORS	13.	u Ayeni	PIÔUSIOLE LECTOR	ADDITIONS/CHANGES TO OFFICE		TORS IN 12
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NAME	MCALISTER, STEVEN M		1,2 N		Ì	# . # ·		-
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				REET AL	i	te .	in a significant of the signific	
Citristi Zir	JACKSONVILLE FL 32207	DELETE		TY-St-	i		Chan	ge Additio
Cotrosto Zar Title	JACKSONVILLE FL 32207 D	DELETE	1 4 Ci	TY-ST- TLE	i		Chan	ge Additio
COTY - ST - ZAP THILF NAVE	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS	☐ DELETE	1 4 CF 2 1 TC 2.2 N/	TY-ST- TLE AME	ZIP		Chan	ge Addition
CHTT-ST-ZP TITLE NAVE STREET ADDRE	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR.	☐ DELETE	1 4 CF 2 1 TF 2 2 N/ 2 3 SF	TY-ST- TLE AME TREET AC	ZIP DDRESS		Chan	ge Addition
COTY STAZEL TOTHE NAME STREET ADDRE COTY (\$1 - Ze)	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS	☐ DELETE	14 Ci 21 Ti 22 Ni 23 Si 2.4 C	TY-ST- TLE AME TREET AC HTY-ST-	ZIP DDRESS		☐ Chan	·
COTY - ST - ZAP TOTLE NAME STREET ADDRE CITY - ST - ZAP T-D.E	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D		14 CF 21 TF 2.2 N/ 2.3 SF 2.4 C 3.1 TF	TY-ST- TLE AME TREET AC HTY-ST- TLE	ZIP DDRESS			·
CHT+ST-ZPT THEF NAVE STREET ADDRE CTY+ST-ZPT THEF NAME	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES	DELETE	14 CI 21 TI 22 N/ 23 SI 2 4 C 3.1 TI 3.2 N/	TY-ST- TLE AME TREET AS TITY-ST- TLE AME	ZIP DDAESS ZIP		Char	·
COTY STORM THEF NAME STREET ADDRE COTY STORM NAME NAME STREET ADDRE	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES 1720 BROKEN BOW DR., WE	DELETE	1 4 CI 2 1 Tr 2 2 Nr 2 3 SI 2 4 C 3 1 Tr 3 2 Nr 3 3 SI	TY-ST- TLE AME TREET AC ETY-ST- TLE AME TREET AC	ZIP DDRESS ZIP DORESS		Char	·
COTY STORM TOTH MAYE STREET ADDRE COTY STORM NAME STREET ADDRE COTY STORM COTY STO	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES	DELETE	1 4 Cl 21 Tr 22 N/ 23 Sl 2 4 C 3.1 Tr 3.2 N/ 3.3 Sl 3.4 C	TY-ST- TLE AME TREET AS TTY-ST- TLE AME TREET AS	ZIP DDRESS ZIP DORESS		Char	nge Addition
COTY STO ZIP TITLE NAME STREET ADDRE COTY STORY NAME STREET ADDRE COTY STORY TOTA TOTA TOTA TOTA TOTA	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES 1720 BROKEN BOW DR., WE	DELETE	1 4 CI 21 TI 22 NV 23 SI 2. 4 C 3.1 TI 3.2 NV 3.3 SI 3.4 C	TY-ST- TLE AME TREET AC HTY-ST- TLE AME TREET AC HTY-ST- TLE	ZIP DDRESS ZIP DORESS		∴ Char	nge Addition
CHY-ST-ZIP TITLE NAME STREET ADDRE CHY-ST-ZIP TITLE NAME CHY-ST-ZIP TITLE NAME	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES 1720 BROKEN BOW DR., WE JACKSONVILLE FL 32225	DELETE	1 4 Cl 21 Tr 22 Nv 23 Sl 2 4 C 3.1 Tl 3.2 Nv 3.3 Sl 3.4 C 4.1 Tr 4 2 Nv	TY-ST- TLE AME TREET AC HTY-ST- TLE AME TREET AC HTY-ST- TLE	DDRESS ZIP DDRESS ZIP DDRESS		∴ Char	nge Addition
CHY-ST-ZP THEF NAME STREEL ADDRE CHY-SE-ZP THUE NAME SUBSEL ADDRE CHY-ST-ZP THUE NAME STREEL ADDRE	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES 1720 BROKEN BOW DR., WE JACKSONVILLE FL 32225	DELETE	14 CI 21 TY 22 NV 23 SI 2.4 G 3.1 TI 3.2 NV 3.3 SI 3.4 C 4.1 TI 4.2 N 4.3 SI	TY-ST- TLE AME TREET AC HTY-ST- TLE AME TREET AC HTY-ST- TLE LTY-ST- TLE	DDRESS ZIP DDRESS . ZIP DDRESS .		∴ Char	nge Addition
CHY-ST-ZIP TITLE NAME STREET ADDRE CHY-ST-ZIP TITLE NAME CHY-ST-ZIP TITLE NAME	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES 1720 BROKEN BOW DR., WE JACKSONVILLE FL 32225	DELETE	1 4 Cl 21 Tr 22 NV 23 Sl 2. 4 C 3.1 Ti 3.2 NV 3.3 Sl 3.4 C 4.1 Tr 4.2 N 4.3 Sl 4.4 Cl	TY-ST- TLE AME TREET AC HTY-ST- TLE AME TTY-ST- TLE HAME TREET AC TLE HAME	DDRESS ZIP DDRESS . ZIP DDRESS .		∴ Char	ige Addition
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COTY STO ZIP TOTE NAME STREET ADDRE COTY STO ZIP TOTE NAME NAME NAME	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES 1720 BROKEN BOW DR., WE JACKSONVILLE FL 32225	DELETE	1 4 Cl 21 Tr 22 Nv 23 S1 2.4 C 3.1 Tr 3.2 Nv 3.3 S1 3.4 C 4.1 Tr 4.2 N 4.3 S7 4.4 Cl 5.1 Tr 5.2 Nv 5.3 S1	TY-ST- TLE AME TREET AC TITY-ST- TLE AME TREET AC TITY-ST- TLE TLE TLE TREET AC TREET	DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS		Char	ige Addition
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COTY STO ZIP TITLE NAME STREET ADDRE COTY STO ZIP TITLE NAME NAME	JACKSONVILLE FL 32207 D BERGSTROM, TAVIS 8902 ELIZABETH FALLS DR. JACKSONVILLE FL 32257 D HANEY, JAMES 1720 BROKEN BOW DR., WE JACKSONVILLE FL 32225	DELETE DELETE DELETE	1 4 CI 21 TI 22 NV 23 SI 2. 4 C 3.1 TI 3.2 NV 3.3 SI 4.4 CI 5.1 TI 5.2 NV 5.3 SI 6.4 TI 6.2 NV 6.3 SI	TY-ST- TILE AME TREET AC TY-ST- TY- TY-ST- TY- TY- TY- TY- TY- TY- TY- TY- TY- T	DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS ZIP		☐ Char	ige Addition

Tam 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 accomment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIF

0031703