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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000050699 (3)

TRANSCARE PRESCRIPTION SERVICES, INC.

FILED Apr 18 1997 8:00am Secretary of State

Making Address Maki					
ORLANDO FL 32816 ORLANDO FL 32816 S. Dete Incorporated or Qualified S. Date of Last Report ORLANDO FL 32816 S. Dete Incorporated or Qualified S. Date of Last Report ORLANDO FL 32816 S. Date	Principal Place of Business	Mailing Address		i centifet im seile firit Entit delli gent biet bill delli delli delli	,,
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22 Shopping Place of Business 22 Maring Address 23 Shopping Address 24 Fel Number Sq-3381833 Not Applied For Not App					
None	2. Principal Place of Business	2a. Mailing Address			For
Solitor Agri H. Cott. 28	21 5love W. Colonial Dr.	26 5lon W.	Colonial Dr		
City & State City	Suite, Apt. #, etc.	Suite, Apt. #, etc.		SR 75 Additio	nai
Tourier of the provisions of Sections 607 6502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent of the provisions of Sections 607 6502 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 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 Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent are both; in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent are both; in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent are both; in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent are both; in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent are both of the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agent are statement for the purpose of changing its registered agen	22 309	27 309		Fee Required	1
279 30 80 80 25 25 25 25 25 25 25 2		L	•	6. Election Campaign Financing \$5.00 May E	Зе
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9. Name and Address of Current Registered Agent AUSTIN, CAROLYN 1024 BYERLY WAY ORLANDO FL 32818 83 84 60 85 60 86 60 87 88 88 88 88 89 89 89 80 80 80		سبباء مساسب)32,
AUSTIN, CAROLYN 1024 BYERLY WAY ORLANDO FL 32818 11. Pursuant to the provisions of Sections 607 0502 and 607 1506, Florida Statutes, the above-named composition submits this statement for the purpose of changing its registered agent or both, in the State of Florida Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent large familiar with, and accept the obligations of Section 607 0505, Florida Statutes, and above-named compositions submits this statement for the purpose of changing its registered agent large familiar with, and accept the obligations of Section 607 0505, Florida Statutes SIGNATURE 12. CFFICE IS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICES AND DIRECTORS IN 12. 14. CFFICE IS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICES AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICES AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES TO OFFICES AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICES AND DIRECTOR			30 0514		
1024 BYERLY WAY ORLANDO FL 32818 82 Street Address (P.Q. Box Number) is Not Acceptable) 83 Street Address (P.Q. Box Number) is Not Acceptable) 84 City		Hegistered Agent	91 Nama 5		-
ORLANDO FL 32818 83			or marile	CArolun Miller (only	3°)
B3			82 Street Add	dress (P.Q. Box Number is Not Acceptable)	
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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 agent. I are familiar with and accept the objections of Section 607.6505. Florida Subtracted by the corporation's board of directors. I hereby accept the appointment as registered agent. I are familiar with and accept the objections of Section 607.6505. Florida Statutes SIGNATURE S			03	9 1	- 1
11. Pursuant to the previsions of Socions 607 5002 and 607 15008. Florida Statutes, the above-named corporation submits this statement for the purpose of changing list registered office or registered again or both, in the State of Florida Such change was authoritized by the corporation's board of directors. I hereby accept the appointment as registered again. I am familiar with and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE SIG			84 City	85 Zip Code	
agent Land familiar wills, and accept the obligations of Section 607 0505, Florida Statutes SIGNATURE Signature (Land or preference septe and other appreciates) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 14. CITY-ST-ZIP INTE CRACK STREET ADDRESS OFFICERS AND DIRECTORS 14. CITY-ST-ZIP INTE CRACK STREET ADDRESS OFFICERS AND DIRECTORS IN 12 Change Addition Addition Addition Change Addition Change Addition Change Addition Change Addition Addition Change Addition Chang	11 Durawayt to the provisions of Costions 607 0502	and 607 1500 Florido Cratu	too the shows named so		Z
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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

SMATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

olynMiller 3/12/0

Daytime Phone #

0092193