

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

FILED
May 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000034575 (5)

1. Corporation Name

CHC ADMINISTRATORS, INC.

Principal Place of Business

7406 FULLERTON ST., STE. 200
JACKSONVILLE FL 32256

Mailing Address

7406 FULLERTON ST., STE. 200
JACKSONVILLE FL 32256

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1997

4. FEI Number

59-3468515

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

STOCKER, JOEL L
1221 BRICKELL AVE.
MIAMI FL 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

TITLE	D	DELETE
NAME	POWELL, RICHARD C	
STREET ADDRESS	7406 FULLERTON ST., STE. 200 ,	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
TITLE	D	DELETE
NAME	ROTHSTEIN, MITCHELL	
STREET ADDRESS	1801 BARRS ST., STE. 810	
CITY-ST-ZIP	JACKSONVILLE FL 32204	
TITLE	D	DELETE
NAME	RYUGO, KAREN	
STREET ADDRESS	411 W. PUTNAM AVE.	
CITY-ST-ZIP	GREENWICH CT 06830	
TITLE	D	DELETE
NAME	MINELLA, RAYMOND J	
STREET ADDRESS	667 MADISON AVE.	
CITY-ST-ZIP	NEW YORK NY 10021	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	Change	Addition
1.2 NAME	HU, JONATHAN		
1.3 STREET ADDRESS	7406 FULLERTON ST., STE. 200		
1.4 CITY-ST-ZIP	JACKSONVILLE, FL 32256		
2.1 TITLE	D	Change	Addition
2.2 NAME	PAREKH, DEVEN		
2.3 STREET ADDRESS	667 MADISON AVENUE		
2.4 CITY-ST-ZIP	NEW YORK, NY 10021		
3.1 TITLE	D	Change	Addition
3.2 NAME	PLAMANN, MARK		
3.3 STREET ADDRESS	411 WEST PUTNAM AVENUE		
3.4 CITY-ST-ZIP	GREENWICH, CT 06830		
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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.

SIGNATURE:

Richard C. Powell

Richard C. Powell 4/30/98

(904) 519-0900

CR2E034 (10/97)