

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 12, 2001 08:00 AM**
Secretary of State**DOCUMENT # P97000073126**1. Entity Name
CLAIMS MANAGEMENT CENTER, INC.Principal Place of Business
110 SE 6TH ST
20TH FL
FORT LAUDERDALE FL 33301 USMailing Address
110 SE 6TH ST
20TH FL
FORT LAUDERDALE FL 33301 US2. Principal Place of Business
200 S. ANDREWS AVE.3. Mailing Address
200 S. ANDREWS AVE.Suite, Apt. #, etc.
11TH FLOORSuite, Apt. #, etc.
11TH FLOORCity & State
FORT LAUDERDALE FLCity & State
FORT LAUDERDALE FLZip Country
33301 USZip Country
33301 US4. FEI Number
65-0779218Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD

PLANTATION FL 33324 US

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ 04/12/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE T ☐ Delete
NAME BOURHIS MARC L
STREET ADDRESS 110 SE 6TH ST 20TH FL
CITY-ST-ZIP FT. LAUDERDALE FL 33301TITLE DVS ☐ Delete
NAME FERRANDO JONATHAN P
STREET ADDRESS 110 SE 6TH ST 20TH FL
CITY-ST-ZIP FT. LAUDERDALE FL 33301TITLE DP ☐ Delete
NAME MAROONE MICHAEL E
STREET ADDRESS 110 SE 6TH ST 20TH FL
CITY-ST-ZIP FT. LAUDERDALE FL 33301TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME WOOD MARY
STREET ADDRESS 200 S. ANDREWS AVE.
CITY-ST-ZIP FT. LAUDERDALE FL 33301TITLE D ☒ Change ☐ Addition
NAME HYLE KATHLEEN W
STREET ADDRESS 200 S. ANDREWS AVE.
CITY-ST-ZIP FT. LAUDERDALE FL 33301TITLE DS ☒ Change ☐ Addition
NAME SCHWARTZ HOWARD D
STREET ADDRESS 200 S. ANDREWS AVE.
CITY-ST-ZIP FT. LAUDERDALE FL 33301TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Howard D. Schwartz

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04/12/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)