

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000029635

1. Entity Name
HEALTH CARE CO-OP, INC.

FILED

02 JUN 14 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
631 N WYMORE ROAD
SUITE 200
MAITLAND FL 32751

Mailing Address
631 N WYMORE ROAD
SUITE 200
MAITLAND FL 32751

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip
Country

4. FEI Number 59-3583087
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RYLACKI, JACK — JACK RYBICKI
631 N WYMORE ROAD
SUITE 200
MAITLAND FL 32751

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. 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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC COGAN, CHRISTOPHER G 631 N WYMORE ROAD SUITE 200 MAITLAND FL 32751	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM FREY, DALE 631 N WYMORE ROAD SUITE 200 MAITLAND FL 32751	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM RYAN, JOE 631 N WYMORE ROAD SUITE 200 MAITLAND FL 32751	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM CAULO, RALPH 631 N WYMORE ROAD SUITE 200 MAITLAND FL 32751	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM ROSEN, FRED 631 N WYMORE ROAD SUITE 200 MAITLAND FL 32751	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM DRESNER, DAVE 631 N WYMORE ROAD SUITE 200 MAITLAND FL 32751	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	See 6 additions per attached schedule	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cops	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	900005380799--1 -06/25/02--01075--021 ***1200.00 ***150.00	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM & M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: Jack Rybicki
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/02
Date

407.691.5000
Daytime Phone #

CR2E034 (9/01)

2 of 2

Name	Title
Directors: (*)	
Dale Frey	Chairman of the Board
Joe Ryan	Board Member
Ralph Caulo	Board Member
Suzy Goldberger	Board Member
Rick Kelleher	Board Member
Dave Dresner	Board Member
Brian Weed	Board Member
Officers:	
Dave Dresner	President & Chief Executive Officer
Bill Johnston	Executive Vice President Corporate Development & Marketing
Jack Rybicki	Senior Vice President & Chief Financial Officer
Charles Fountain	Senior Vice President & Chief Information Officer

status

SAME

SAME

SAME

ADDITION

ADDITION

SAME

ADDITION

NOTED ABOVE

ADDITION

ADDITION

ADDITION

* All officers/Directors are located at
the corporate address