

2008 FOR PROFIT CORPORATION ANNUAL REPORT

8/1/2008-90039-021-\$158.75-\$158.75

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01212008 Chg-P CR2E034 (12/06)

DOCUMENT # P99000095240					
1. Entity Name CARE MANAGEMENT SERVICES, INC.					
Principal Place of Business 3319 MAGUIRE BLVD. SUITE 100 ORLANDO, FL 32803			Mailing Address 3319 MAGUIRE BLVD. SUITE 100 ORLANDO, FL 32803		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3609907	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
PHALIN, LAWRENCE J 225 E ROBINSON ST, SUITE 600 ORLANDO, FL 32801			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when reappointing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	O'ROURKE, AMY CAMERON		NAME		
STREET ADDRESS	1740 WYCLIFF DR		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP		
TITLE	VP	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	DORELL, PATRICIA		NAME		
STREET ADDRESS	888 CAREW AVE		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32804		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
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CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Patricia Dorell</i></u>			7/29/08 407/896-2010		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

The CAMERON GROUP

3319 Maguire Blvd, Suite 100

Orlando, FL 32803

PHONE 407-896-2010

FAX 407-228-0033

WWW.THECAMERONGROUP.US

August 22, 2008

Florida Dept of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Care Management Services, Inc.
aka - The Cameron Group
Filing fee

To Whom It May Concern;

I have been employed with The Cameron Group for only a few months. The records that I researched indicate that the Annual Business Report was mailed approximately April 15th and should have been received before May 1, 2008.

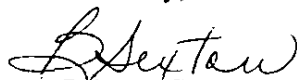
I received a notice the end of June that the report had not been received. We then completed another form signed and dated 7/29/08, and sent our check in the amount of \$158.75.

Today, we have been notified that additional payment is now due. Is it possible that the original Annual Report was misplaced or lost, given the fact that most citizens were filing their taxes before the deadline of April 15th? We would appreciate it if this were taken into consideration and ask that the additional fees be waived.

We would appreciate any considerations in this matter. Please advise at your earliest convenience and if additional fee is in order, we will forward a check immediately.

Thank you for your time.

Sincerely,



Brigitte Sexton,
Accounting Manager
3319 Maguire Blvd. #100
Orlando, FL 32803
407-896-2010

enc.