

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90371 038 ***150.00

00015012



DO NOT WRITE IN THIS SPACE

DOCUMENT # 829863

1. Entity Name

OWEN HEALTHCARE, INC.

Principal Place of Business

Mailing Address

9800 CENTRE PKWY #1100
 HOUSTON TX 77036
 US

7000 CARDINAL PLACE
 DUBLIN OH 43017
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **75-1329577**

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

**CORPORATION SERVICE COMPANY,
 1201 HOYS STREET
 TALLAHASSEE FL 32301**

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	☐ Delete
NAME	MARTIN, GLEN L	
STREET ADDRESS	7000 CARDINAL PLACE	
CITY-ST-ZIP	DUBLIN OH 43017	
TITLE	C	☒ Delete
NAME	KANE, JOHN C	
STREET ADDRESS	7000 CARDINAL PLAVE	
CITY-ST-ZIP	DUBLIN OH 43017	
TITLE	P	☐ Delete
NAME	WINSTEAD, DWIGHT	
STREET ADDRESS	9800 CENTRE PARKWAY, STE 1100	
CITY-ST-ZIP	HOUSTON TX 77036	
TITLE	V	☒ Delete
NAME	MARLETT, MARJORIE A	
STREET ADDRESS	9800 CENTRE PKWY #1100	
CITY-ST-ZIP	HOUSTON TX 0000	
TITLE	V	☒ Delete
NAME	FLORANCE, STANLEY H.	
STREET ADDRESS	7923 OAKINGTON DR.	
CITY-ST-ZIP	HOUSTON TX 0000	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Director	☐ Change ☒ Addition
NAME	Miller, Richard J.	
STREET ADDRESS	7000 Cardinal Place	
CITY-ST-ZIP	Dublin, OH 43017	
TITLE	Treasurer	☐ Change ☒ Addition
NAME	Brandin, Donna	
STREET ADDRESS	7000 Cardinal Place	
CITY-ST-ZIP	Dublin, OH 43017	
TITLE	Vice Chairman	☐ Change ☒ Addition
NAME	James F. Miller	
STREET ADDRESS	7000 Cardinal Place	
CITY-ST-ZIP	Dublin, OH 43017	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ 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 19.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Glenn L. Martin

Date

Daytime Phone #

1-15-01 614-757-5000