

F00000000 1027

TRANSMITTAL LETTER

TO: Qualification/Registration Section  
Division of Corporations

SUBJECT: GNA & ASSOCIATES, INC.  
(Name of Corporation)

500003143425--6  
-02/22/00--01080--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

RANDY VAN ANTIWERP  
(Name of Person)  
GNA & ASSOCIATES, INC.  
(Firm/Company)  
950 TAYLOR AVENUE  
(Address)  
GRAND HAVEN, MI 49417  
(City, State and Zip Code)

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For further information concerning this matter, please call:

RANDY VANANTIWERP at ( 616 ) 844-6284 -  
(Name of Person) Area Code & Daytime Telephone Number

**STREET ADDRESS:**  
Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Qualification/Tax Lien Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Spgr

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR  
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR  
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:**

1. GNA & ASSOCIATES, INC.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. MICHIGAN 3. 38-2942508  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/29/90 5. PERPETUAL  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 8/1/99  
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 617.155, F.S.)
7. GNA & ASSOCIATES, INC.

950 TAYLOR AVENUE GRAND HAVEN MT 49417  
(Current mailing address)

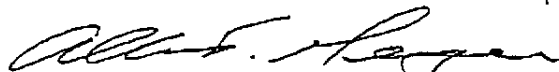
8. TO PROVIDE REHABILITATION SERVICES  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

**9. Name and street address of Florida registered agent:**

ALLAN T. GEIGER, ESQUIRE (Name)  
ROGERS, TOWERS, BAILLY, JONES & GAY  
1301 RIVERPLACE BLVD, SUITE 1500  
(Office address)

JACKSONVILLE, Florida, 32207  
(City) (Zip Code)

**10. Registered agent's acceptance:**  
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



(Registered agent's signature)

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11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: \*\*\*\*\*SEE ATTACHED LIST \*\*\*\*\*

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Michael W. LaPonsie  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

Michael W. LaPonsie, Vice President of Finance  
(Typed or printed name and capacity of person signing application)

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1/1/99

GNA/MCC  
BOARD OF TRUSTEES

Category  
Chair :

Membership

**Bruce Van Cleave, M.D.**  
Executive Vice President, Professional Services  
Mercy Health Services  
34605 Twelve Mile Road  
Farmington Hills, MI 48331  
Office: 248-489-6892  
Secretary: Linda Lawrence - 248-489-6892  
Fax: 248-489-6690  
E-Mail: VANCLEAB@mercyhealth.com

Secretary/  
Treasurer

**Edward G. Chadwick**  
Vice President of Finance  
Mercy Health Services  
34605 Twelve Mile Rd.  
Farmington Hills, MI 48331  
Office: 248-489-6060  
Fax: 248-489-6075  
Secretary: Max Morganstern - 248-489-6060  
E-Mail: CHADWICE@mercyhealth.com

Religious Sister  
of Mercy:

**Judith VanderVeen, RSM**  
5555 McAuley Drive  
Ypsilanti, MI 48197  
Office: 734-973-3618  
Fax: 734-677-5078  
E-Mail: jvander@orchard.washtenaw.cc.mi.us

Physician Reps.

**John F. Butzer, M.D.**  
Vice President, Medical Affairs / Medical Director  
Mary Free Bed Hospital & Rehabilitation Center  
235 Wealthy S. E.  
Grand Rapids, MI 49503-5299  
Office: 616-242-0357  
Fax: 616-454-3939  
Secretary: Ann Armbrust  
E-Mail: BUTZERJ@mercyhealth.com

**Alan N. Dengiz, M.D.**  
Director of Geriatric Medicine  
St. Joseph Mercy Health System  
5361 McAuley Dr.  
Ann Arbor, MI 48106  
Office: 734-712-5189  
Fax: 734-712-5302  
Secretary: Cindy Durham - 734-712-2653  
E-mail: ADENGIZ@mercyhealth.com

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**Other Board Reps.:**

**Sheldon L. Goldberg**  
President and CEO  
Jewish Home and Hospital  
120 W. 106th Street  
New York, NY 10025  
Office: 212-870-4800  
Fax: 212-870-4895  
Secretary: Barbara Schassler - 212-870-4800  
E-mail: sgoldberg@jhha.org

**Steven F. Kukla**  
Vice President  
Mercy Health Network  
4500 Westown Parkway, Suite 250  
W. Des Moines, IA 50266  
Office: 515-224-3294  
Fax: 515-224-3546  
Secretary: Carol Lee - 515-224-3294  
E-Mail: KUKLAS@mercyhealth.com

**Gary Nederveld**  
President  
Gary Nederveld Associates (GNA)  
950 Taylor Ave.  
Grand Haven, MI 49417  
Office: 616-844-6260  
Fax: 616-846-0443  
Secretary: Cathy Jasick - 616-844-6253  
E-Mail: NEDERVEG@mercyhealth.com

**Joseph J. Pero**  
4097 Waterwheel  
Bloomfield, MI 48302  
Home: 248-855-3323  
E-Mail:

**Karen (Kathy) Reno, R.N., B.S.N., MBA**  
Executive Vice President of Clinical Services  
Chief Nurse Executive  
Northwest Community Healthcare  
800 West Central  
Arlington Heights, IL 60005-2392  
Office: 847-618-5010  
Fax: 847-618-5009  
Voice-mail: 847-618-5040  
Secretary: Pat Reynolds - 847-618-5012  
E-Mail: kreno@nch.org

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**Michael A. Slubowski**  
Vice President / Director of Operations - Michigan  
Mercy Health Services  
34605 Twelve Mile Rd.  
Farmington Hills, MI 48331  
Office: 248-489-6862  
Fax: 248-489-6900  
Secretary: Susan Niemann - 248-489-6862  
E-Mail: SLUBOWSM@mercyhealth.com

**Karen Struve**  
President and Chief Executive Officer  
Mercy Continuing Care  
39500 Orchard Hill Place Dr., Ste. 400  
Novi, MI 48375-5371  
Office: 248-305-7920  
Fax: 248-305-7933  
Secretary: Karen Rowe - 248-305-7920  
E-Mail: STRUVEK@mercyhealth.com

**Staff:**

**Allyson Boyle**  
Senior Planning Manager  
Mercy Health Services  
34605 Twelve Mile Rd.  
Farmington Hills, MI 48331  
Office: 248-489-6859  
Fax: 248-489-6850  
Secretary: Sandy Marshall - 248-489-6868  
E-Mail: BOYLEAS@mercyhealth.com

**Deborah M. Oaks**  
MHS Governance Assistant  
Mercy Health Services  
34605 Twelve Mile Rd.  
Farmington Hills, MI 48331  
Office: 248-489-6947  
Fax: 248-489-6690  
Secretary: Diane Watson - 248-489-6946  
E-Mail: OAKSD@mercyhealth.com

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**Principal Officers Of GNA & Associates**

**Gary Nederveld**

President  
215 Stickney Ridge  
Grand Haven, MI 49417  
SS# 363-42-3999

**Ken Scholten**

Executive Vice President, Operations  
8182 Buchanan  
Allendale, MI 49401  
SS# 365-56-1098

**Robert Wiersma**

Executive Vice President, Systems Development  
316 Stickney Ridge  
Grand Haven, MI 49417  
SS# 374-54-4126

**John Ritch**

Executive Vice President, Business Development  
2714 Maplework Dr. SE  
E. Grand Rapids, MI 49506  
SS# 133-32-3848

**Mike LaPonsie**

Vice President of Finance  
3895 Mission NW  
Grand Rapids, MI 49504  
SS# 371-62-7731

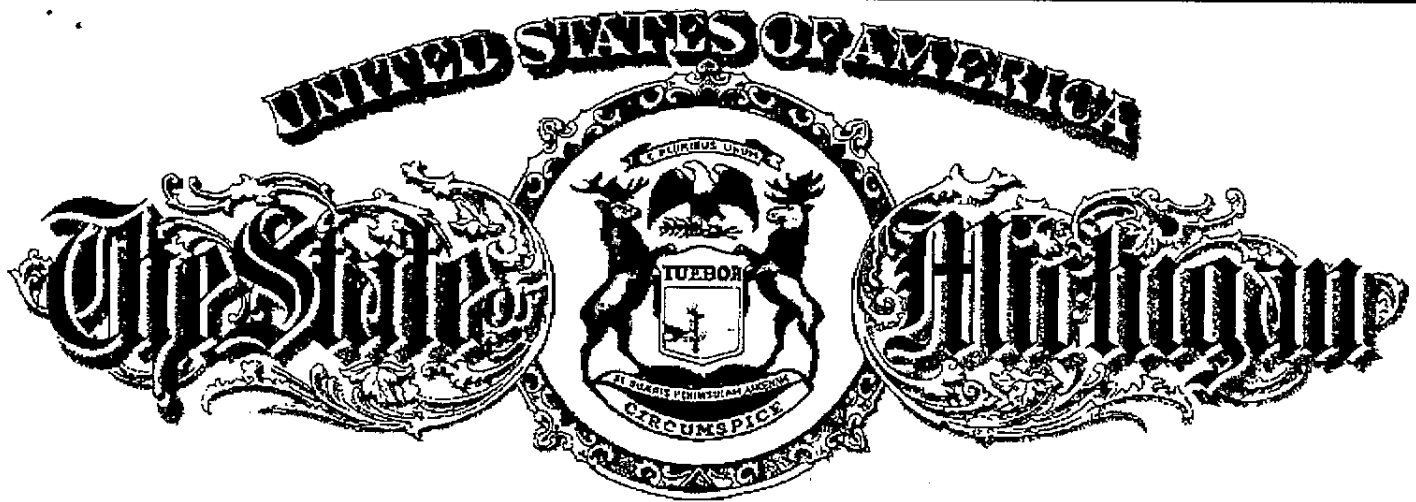
**Chris Wright**

Vice President of Human Resources  
1750 Mohawk Dr.  
Spring Lake, MI 49456  
SS# 380-46-4090

**Pam Hayes**

Vice President of Marketing  
13389 Greenleaf  
Grand Haven, MI 49417  
SS# 385-62-8735

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Michigan Department of Consumer and Industry Services

Lansing, Michigan

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TALLAHASSEE FLORIDA

*This is to Certify That*

**GNA & ASSOCIATES**

*was validly incorporated on April 27, 1990, as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this State.*

*This certificate is issued to attest to the fact that the corporation is in good standing in this office as of this date and is duly authorized to transact business or conduct affairs in Michigan and for no other purpose. It is in the usual form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.*

*In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 5th day of November, 1999.*

*Julie Croll*

, Director

Corporation, Securities and Land Development Bureau

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