

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90129 041 \*\*\*150.00

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **F97000003404**

1. Corporation Name  
**WEST HUDSON, INC.**



Principal Place of Business Mailing Address  
**5420 LBJ FREEWAY SUITE 1355 DALLAS TX 60085 US**  
**1430 WAUKEGAN RD. MCGAW PARK IL 60085**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip Country 28 Zip Country  
 24 25 29 30

3. Date Incorporated or Qualified  
**06/30/1997**  
 4. FEI Number Applied For  
**75-2681942** Not Applicable  
 5. Certificate of Status Desired  **\$8.75** Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees  
 8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	CAIN, RICHARD	
STREET ADDRESS	1430 WAUKEGAN RD.	
CITY-ST-ZIP	MCGAW PARK IL 60085	
TITLE	CEOD	<input type="checkbox"/> DELETE
NAME	KNIGHT, LESTER B	
STREET ADDRESS	1430 WAUKEGAN RD.	
CITY-ST-ZIP	MCGAW PARK IL 60085	
TITLE	PCOD	<input type="checkbox"/> DELETE
NAME	DAMICO, JOSEPH F	
STREET ADDRESS	1430 WAUKEGAN RD.	
CITY-ST-ZIP	MCGAW PARK IL 60085	
TITLE	VCFO	<input type="checkbox"/> DELETE
NAME	MCKEE, PETER B	
STREET ADDRESS	1430 WAUKEGAN RD.	
CITY-ST-ZIP	MCGAW PARK IL 60085	
TITLE	VC	<input type="checkbox"/> DELETE
NAME	WHITE, KATHY B	
STREET ADDRESS	1430 WAUKEGAN RD.	
CITY-ST-ZIP	MCGAW PARK IL 60085	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	FEATHER, WILLIAM L	
STREET ADDRESS	1430 WAUKEGAN RD.	
CITY-ST-ZIP	MCGAW PARK IL 60085	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Wm. Douglas Frank	
1.3 STREET ADDRESS	5420 LBJ Freeway, Ste. 1355,	
1.4 CITY-ST-ZIP	Dallas, TX 75240	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	COOD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Sr. VP, CIO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Sr. VP, GC, Sec.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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

SIGNATURE: *William L. Feather* 4-22-99 847-578-4440  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)

West Hudson, Inc.  
FEIN # 75-2681942  
c/o Allegiance Healthcare Corporation  
1430 Waukegan Road, McGaw Park, Illinois 60085

F97000003404  
53227396129.41

Name	Title	Work Address
Lester B. Knight	CEO	1430 Waukegan Road, McGaw Park, IL 60085
Joseph F. Damico	COO	1430 Waukegan Road, McGaw Park, IL 60085
Wm. Douglas Frank	President	Two Lincoln Center, 5420 LBJ Freeway, Ste. 1355 Dallas, TX 75240
William L. Feather	Sr. V.P., General Counsel & Secretary	1430 Waukegan Road, McGaw Park, IL 60085
Peter B. McKee	Sr. V.P., CFO	1430 Waukegan Road, McGaw Park, IL 60085
Kathy Brittain White	Sr. V.P., CIO	1430 Waukegan Road, McGaw Park, IL 60085
Robert B. De Baun	Corp. V.P.	1430 Waukegan Road, McGaw Park, IL 60085
Mark J. Ehlert	Corp. V.P.	1430 Waukegan Road, McGaw Park, IL 60085
Leonard G. Kuhr	Corp. V.P. & Treasurer	1430 Waukegan Road, McGaw Park, IL 60085
James P. Stauner	Corp. V.P.	1425 Lake Cook Road, Deerfield, IL 60015
Priscilla Rellas Scoco	Asst. Secretary	1430 Waukegan Road, McGaw Park, IL 60085
Joseph L. Landers, Jr.	Assistant Treasurer	1430 Waukegan Road, McGaw Park, IL 60085
Michael T. Quane	Assistant Treasurer	1430 Waukegan Road, McGaw Park, IL 60085

**Directors**

Lester B. Knight	SEE ABOVE
Joseph F. Damico	SEE ABOVE
Wm. Douglas Frank	SEE ABOVE
William L. Feather	SEE ABOVE
James P. Stauner	SEE ABOVE