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FILED
May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J98943 (0)

1. Corporation Name
MERIT BEHAVIORAL CARE OF FLORIDA, INC.

Principal Place of Business	Mailing Address
8000 GOVERNORS SQUARE BLVD. SUITE 305 MIAMI LAKES FL 33016	400 OYSTER PT BLVD STE 306 S SAN FRANCISCO CA 94080-1852 US

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

3. Date Incorporated or Qualified: 10/27/1987
3a. Date of Last Report: 04/05/1996
4. FEI Number: 94-3056228 ☐ Applied For ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S 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			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	D	☒ Change ☐ Addition
NAME	WAXMAN, ALBERT		1.2 NAME	WAXMAN, ALBERT S.	
STREET ADDRESS	1350 AVENUE OF THE AMERICAS, STE 501A		1.3 STREET ADDRESS	ONE MAYNARD DRIVE	
CITY-ST-ZIP	NEW YORK NY		1.4 CITY-ST-ZIP	PARK RIDGE, NEW JERSEY 07656	
TITLE	PD	☒ DELETE	2.1 TITLE	D/P	☐ Change ☒ Addition
NAME	KENNEDY, SHANNON		2.2 NAME	SURLES, RICHARD C.	
STREET ADDRESS	1 MAYNARD DR		2.3 STREET ADDRESS	ONE MAYNARD DRIVE	
CITY-ST-ZIP	PARK RIDGE NJ		2.4 CITY-ST-ZIP	PARK RIDGE, NEW JERSEY 07656	
TITLE	P	☒ DELETE	3.1 TITLE	D/V/T	☐ Change ☒ Addition
NAME	AUSTIN, TIMOTHY L		3.2 NAME	HALPER, ARTHUR H.	
STREET ADDRESS	13736 RIVERPORT DR		3.3 STREET ADDRESS	ONE MAYNARD DRIVE	
CITY-ST-ZIP	MARYLAND HEIGHTS MO		3.4 CITY-ST-ZIP	PARK RIDGE, NEW JERSEY 07656	
TITLE	V	☒ DELETE	4.1 TITLE	V/S	☐ Change ☒ Addition
NAME	MOODY, DENNIS		4.2 NAME	LENAHAN, MICHAEL G.	
STREET ADDRESS	8000 GOVERNORS SQUARE BLVD., #305		4.3 STREET ADDRESS	ONE MAYNARD DRIVE	
CITY-ST-ZIP	MIAM LAKES FL 33016		4.4 CITY-ST-ZIP	PARK RIDGE, NEW JERSEY 07656	
TITLE	D	☒ DELETE	5.1 TITLE	V	☐ Change ☒ Addition
NAME	BERNARD, SCOTT		5.2 NAME	LAZAROFF, DENNIS J.	
STREET ADDRESS	111 S. PARKER ST., #400		5.3 STREET ADDRESS	13736 RIVERPORT DRIVE, STE. 400	
CITY-ST-ZIP	TAMPA FL 33606		5.4 CITY-ST-ZIP	MARYLAND HEIGHTS, MO 63043	
TITLE	S	☐ DELETE	6.1 TITLE	S	☒ Change ☐ Addition
NAME	CUMMINGS, ANDREW M		6.2 NAME	CUMMINGS, ANDREW M.	
STREET ADDRESS	400 OYSTER POINT BLVD., #306		6.3 STREET ADDRESS	ONE MAYNARD DRIVE	
CITY-ST-ZIP	SOUTH SAN FRANCISCO CA 94080		6.4 CITY-ST-ZIP	PARK RIDGE, NEW JERSEY 07656	

CR2E034 (9/96)

14. I do 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.

SIGNATURE: Andrew M. Cummings 4/30/97

Merit Behavioral Care of Florida, Inc.

Item 13. Additional Officers (Last appointed 4/1/96)

Vice President, Southern Region
James Foos
8000 Governors Square Blvd., Suite 305,
Miami Lakes, FL 33016