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CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
Jen Smith
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name HANLEY - HAZELDEN CENTER AT ST. MARY'S, INC.		DOCUMENT # N04792 (0)	
Mailing Address 5200 EAST AVENUE W PALM BCH., F L 33407		Principal Place of Business 5200 EAST AVENUE W PALM BCH., F L 33407	

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. Mailing Address		2a. Principal Place of Business		3. Date Incorporated or Qualified 08/20/1984		3a. Date of Last Report 04/21/1993	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FLI Number 59-2500657		Applied For (Not Applicable)	
22. City & State		27. City & State		5. Certificate of Status Desired \$8.75 Additional Fee Required <input checked="" type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
23. Zip		28. Zip		7. Nonprofit Exempt from \$138.75 Supplemental Fee <input checked="" type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country		29. Country		30. Country		8. This corporation is eligible for an income tax under 5-192.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent PLANT, TIMOTHY D. 5200 EAST AVENUE W PALM BCH., F L FL 33407				10. Name and Address of New Registered Agent			
81. Name				82. Street Address (P.O. Box Number is Not Acceptable)			
83. City				84. City			
85. State				86. Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN '94	
11. TITLE V/C/D	ROONEY, PATRICK J.	11. TITLE V/C/D	Wentz Miller
12. NAME	4111 N. CONGRESS AVE.	12. NAME	901 45th Street
13. STREET ADDRESS	W. PALM BEACH FL	13. STREET ADDRESS	West Palm Beach, FL 33407
14. CITY - ST - ZIP		14. CITY - ST - ZIP	
21. TITLE C/D	ROSSIN THOMAS	21. TITLE	
22. NAME	505 SOUTH FLAGLER DRIVE, SUITE #1001	22. NAME	
23. STREET ADDRESS	WEST PALM BEACH FL	23. STREET ADDRESS	
24. CITY - ST - ZIP		24. CITY - ST - ZIP	
31. TITLE T	LEWIS LEANN	31. TITLE	
32. NAME	15245 PLEASANT VALLEY ROAD	32. NAME	
33. STREET ADDRESS	CENTER CITY MN	33. STREET ADDRESS	
34. CITY - ST - ZIP		34. CITY - ST - ZIP	
41. TITLE V	PLANT TIMOTHY D	41. TITLE	
42. NAME	5200 EAST AVENUE	42. NAME	
43. STREET ADDRESS	WEST PALM BEACH FL	43. STREET ADDRESS	
44. CITY - ST - ZIP		44. CITY - ST - ZIP	
51. TITLE P/D	SPICER, JERRY	51. TITLE	
52. NAME	15245 PLEASANT VALLEY RD	52. NAME	
53. STREET ADDRESS	CENTER CITY MN	53. STREET ADDRESS	
54. CITY - ST - ZIP		54. CITY - ST - ZIP	
61. TITLE S	MCELRATH, DAMIAN	61. TITLE	
62. NAME	15245 PLEASANT VALLEY RD	62. NAME	
63. STREET ADDRESS	CENTER CITY FL	63. STREET ADDRESS	
64. CITY - ST - ZIP		64. CITY - ST - ZIP	Center City MN 55012

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerry Spicer Jerry Spicer, President 3-2-94 612 257-4010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER, OFFICER OR DIRECTOR Date Listing Phone #