

[Empty rectangular box]

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

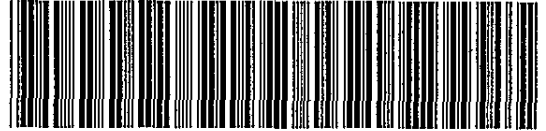
\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_    Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

[Empty rectangular box for special instructions]

Office Use Only



600037613476

**FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.**

CORPORATION  
ANNUAL REPORT  
1992



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

APPROVED  
SEC. OF STATE  
JAN 20 1993

Read Instructions on Other Side Before Making Entries  
**FILING FEE \$61.25 Make Payable To: Secretary of State**

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation **DOCUMENT #N04792 (0)**  
**HANLEY - HAZELDEN CENTER AT ST. MARY'S, INC.**  
**5200 EAST AVENUE**  
**WEST PALM BEACH FL 33407-2352**

2. If Address in Block 1 is incorrect in any way, line through it and enter correct information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State

24 Zip Code

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

3. Date Incorporated or Qualified To Do Business in Florida **08/20/1984**

3a. Date of Last Report **03/13/1991** 4. FEI Number **59-2500657** FEI Number Applied For 5. **\$8.75 Additional Fee required for a Certificate of Status** FEI Number Not Applicable **CERTIFICATE OF STATUS DESIRED**

6. Names and Street Addresses of Each Officer and Director (Do not use any correcting tape or fluid to cover over incorrect information)

1 Title	2 Name of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1x V/C/D	ROONEY, PATRICK J.	1111 N. CONGRESS AVE.	W. PALM BEACH, FL
2x C/D	PARK, ALVIN	3225 W. GULF DR., B102	SANIBEL ISLAND, FL.
3x T	JAX, EUGENE	15245 PLEASANT VALLEY RD	CENTER CITY, MN
4x V	CONLOW, HAROLD T	15245 PLEASANT VALLEY RD	CENTER CITY, MN
5x P	SPICER, JERRY	15245 PLEASANT VALLEY RD	CENTER CITY, MN
6 S/D	SWIFT, HAROLD McElrath, Damian	15245 PLEASANT VALLEY RD 15245 Pleasant Valley Rd	CENTER CITY, FL. Center City, MN

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent  
**PLANT, TIMOTHY D.**  
**5200 EAST AVENUE**  
**W PALM BCH., F L. 33407**

8. Name and Address of the Registered Agent  
81 Name  
82 Street Address 1 (Do NOT Use P.O. Box Number)  
83 Street Address 2 (Do NOT Use P.O. Box Number)  
84 City **FL.** 85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1514 or Sections 617.0102 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 Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment)

10. This corporation has liability for intangible tax under S 199.032, Florida Statutes. Yes  No  (See other side for information concerning this tax.)

11. I 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. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 6 or an attachment with an address.

SIGNATURE Jerry Spicer DATE **3/10/92**  
Typed Name of Signing Officer or Director **Jerry Spicer** Title **President** Telephone Number (Area) **( 612 ) 257-4010**

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee