

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000070228

**Entity Name:** DHM, INC.

**Current Principal Place of Business:**

29777 TELEGRAPH ROAD, SUITE 3000  
SOUTHFIELD, MI 48034

**Current Mailing Address:**

29777 TELEGRAPH ROAD, SUITE 3000  
SOUTHFIELD, MI 48034 US

**FEI Number:** 65-0591535

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED CORPORATE SERVICES, INC  
458 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHIEF INFORMATION OFFICER  
Name COLLINS, STEVE  
Address 29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip: SOUTHFIELD MI 48034

Title CHIEF CLINICAL OFFICER  
Name BRODY, ROBERT  
Address 29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip: SOUTHFIELD MI 48034

Title GROUP PRESIDENT  
Name RUBIN, BURT  
Address 29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip: SOUTHFIELD MI 48034

Title SHAREHOLDER  
Name ADG, LLC  
Address 29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip: SOUTHFIELD MI 48034

Title CHIEF HUMAN RESOURCES OFFICER  
Name MAGNUSSEN, ERIC  
Address 29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip: SOUTHFIELD MI 48034

Title CHIEF TRANSFORMATION OFFICER  
Name RAJADHYAX, NILESH  
Address 29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip: SOUTHFIELD MI 48034

Title DIRECTOR  
Name RAMCHANDRAN, ADESH  
Address 29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip: SOUTHFIELD MI 48034

Title CHIEF EXECUTIVE OFFICER/PRESIDENT  
Name RAMCHANDRAN, ADESH  
Address 29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip: SOUTHFIELD MI 48034

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** GREG NODLAND

**TREASURER/CFO**

**04/05/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           TREASURER/CFO  
Name           NODLAND, GREG  
Address        29777 TELEGRAPH ROAD, SUITE 3000  
City-State-Zip:  SOUTHFIELD MI 48034