

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

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NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **745421** (8)

1. Corporation Name

MEMORIAL HEALTH GROUP, INC.



Principal Place of Business

**875 STERTHAUS AVE.
ORMOND BEACH FL 32174**

Mailing Address

**875 STERTHAUS AVE.
ORMOND BEACH FL 32174**

3. Date Incorporated or Qualified **12/29/1979** 3a. Date of Last Report **03/21/1995**

4. FEI Number **59-1875972** 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

2. Principal Place of Business

2a. Mailing Address

21 **875 Sterthaus Ave**

22 Suite, Apt. #, etc. **26 Suite, Apt. #, etc.**

23 City & State **27 Attn: Charles B Kovel**

24 Zip **28 Ormond Beach FL**

25 Country **29 32174** 30 **USA**

9. Name and Address of Current Registered Agent

**LIND, RICHARD A.
875 STERTHAUS AVENUE
ORMOND BEACH FL 32174**

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 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **RYAN, KENT**
STREET ADDRESS **875 STERTHAUS AVE.**
CITY - ST - ZIP **ORMOND BCH., FL 32174**

TITLE **D** ☒ DELETE
NAME **SLICK, DAVID T.**
STREET ADDRESS **15 SIGNAL AVENUE**
CITY - ST - ZIP **ORMOND BEACH FL 32174**

TITLE **D** ☐ DELETE
NAME **BURT, DAVID A.**
STREET ADDRESS **875 STERTHAUS AVE.**
CITY - ST - ZIP **ORMOND BEACH FL 32174**

TITLE **C** ☐ DELETE
NAME **GARDNER, JAMES E.**
STREET ADDRESS **1 CORPORATE DRIVE**
CITY - ST - ZIP **PALM COAST FL 32137**

TITLE **D** ☒ DELETE
NAME **GRUBER, JOSEPH D.**
STREET ADDRESS **1329 OAK FOREST DRIVE**
CITY - ST - ZIP **ORMOND BEACH FL 32174**

TITLE **D** ☐ DELETE
NAME **MONACO, JUDY T**
STREET ADDRESS **875 STERTHAUS AVE.**
CITY - ST - ZIP **ORMOND BEACH FL 32174**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

D/S ☐ Change ☒ Addition
Ryan, Kent
875 Sterthaus Avenue
Ormond Beach, FL 32174

VCD ☐ Change ☒ Addition
Slick, David T.
15 Signal Avenue
Ormond Beach, FL 32174

D ☐ Change ☒ Addition
Bone, Raynelle
900 Pine Tree Terrace
DeLand, FL 32724

D ☐ Change ☒ Addition
Brown, Richard C.
202 Seabreeze Boulevard
Daytona Beach, FL 32118

T/D ☐ Change ☒ Addition
Gruber, Joseph D.
1329 Oak Forest Drive
Ormond Beach, FL 32174

D ☐ Change ☒ Addition
Dascher, Paul, Ph.D.
3350 Black Willow Trail
DeLand, FL 32724

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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (3/96)

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Additional Directors and Officers for Memorial Health Group, Inc.

D

Ford, Jimmy
875 Sterthaus Avenue
Ormond Beach, FL 32174

D

Gilkey, Lisette
2720 S. Peninsula Drive
Daytona Beach, FL 32118

D

Sidor, George
875 Sterthaus Avenue
Ormond Beach, FL 32174

P

Lind, Richard
875 Sterthaus Avenue
Ormond Beach, FL 32174