

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90078 022 ***150.00

0005124 A1

DOCUMENT # F00000000903

1. Entity Name

NATIONAL HEALTHCARE RESOURCES, INC.

Principal Place of Business

1177 6TH AVE 47TH PLACE
NEW YORK NY 10036

Mailing Address

%ANNETTE MILLER, ATTORNEY
400 S. HIGHWAY 169, SUITE 200
ST. LOUIS PARK MN 55426

2. Principal Place of Business

130 Second Ave

3. Mailing Address

130 Second Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Attn: Corp Tax Dept

City & State

Waltham MA

City & State

130 Second Ave

Zip

02451

Country

Waltham MA

Country

02451

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	GARCIA, CHRISTOPHER J	1177 6TH AVE-47TH PLACE	NEW YORK NY 10036	<input type="checkbox"/>
VST	CUSUMANO, JAMES	1177 6TH AVE-47TH PLACE	WHITE PLAINS NY 10604	<input type="checkbox"/>
D	ANGST, MICHAEL	1177 6TH AVE 47TH PLACE	NEW YORK NY 10036	<input checked="" type="checkbox"/>
D	JAMES, KELLY T	1177 6TH AVE- 47TH PLACE	NEW YORK NY 10036	<input type="checkbox"/>
D	PAUL, ANDREW M	320 PARK AVE., SUITE 2500	NEW YORK NY 10022	<input type="checkbox"/>
D	STRADTNER, JAMES B	300 EAST LOMBARD STREET - STE. 610-A	BALTIMORE MD 21202	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		130 Second Ave	Waltham MA 02451	<input type="checkbox"/>
Director		130 Second Ave	Waltham MA 02451	<input checked="" type="checkbox"/>
Officer	GARY CHADEKEL	130 Second Ave	WALTHAM MA 02451	<input checked="" type="checkbox"/>
Officer		6 Oak Ridge Dr.	Newtown CT 06470	<input checked="" type="checkbox"/>
Officer				<input checked="" type="checkbox"/>
Officer				<input checked="" type="checkbox"/>

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY CHADEKEL

3.12.02

Date

781-290-5350

Daytime Phone #

CR2E034 (9/01)