

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90206 027 ***150.00

DOCUMENT # F00000004042

1. Entity Name
MARK IV IVHS, INC.



Principal Place of Business
**212 DURHAM AVE., SUITE 101
METUCHEN, NJ 08840**

Mailing Address
**P.O BOX 810
AMHERST, NY 14226-0810**

20003918



2. Principal Place of Business - No P.O. Box #
24 Minnekauning Rd
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

03302007 Chg-P CR2E034 (12/06)

City & State
Flemington, NJ
Zip
08822

City & State

4. FEI Number
16-1317836

Applied For
Not Applicable

Zip

Country
USA

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
MONTAGUE, WILLIAM P
501 JOHN JAMES AUDUBON PKWY.
AMHERST, NY 14228** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPT
BARBERIO, MARK G
501 JOHN JAMES AUDUBON PKWY.
AMHERST, NY 14228** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
GRENOLDS, RICHARD L
501 JOHN JAMES AUDUBON PKWY.
AMHERST, NY 14228** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SEC
STEELE, EDWARD R
501 JOHN JAMES AUDUBON PKWY
AMHERST, NY 14228** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PO ☒ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: Edward R. Steele Edward R. Steele 4/10/07 716-689-4972
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #