

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001441

FILED  
Apr 08, 2011  
Secretary of State

**Entity Name:** CHILD HEALTH CORPORATION OF AMERICA

**Current Principal Place of Business:**

6803 WEST 64TH STREET  
SHAWNEE MISSION, KS 66202

**New Principal Place of Business:**

**Current Mailing Address:**

6803 WEST 64TH STREET  
SHAWNEE MISSION, KS 66202

**New Mailing Address:**

**FEI Number:** 52-1421302

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

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

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SHMERLING, JIM  
Address: 13123 EAST 16TH AVENUE  
City-St-Zip: AURORA, CO 80045

Title: PD  
Name: RUTHERFORD, JERRY  
Address: 6803 WEST 64TH STREET, #208  
City-St-Zip: SHAWNEE MISSION, KS 66202

Title: VCFO  
Name: FISCHER, CRAIG F  
Address: 6803 WEST 64TH STREET, #208  
City-St-Zip: SHAWNEE MISSION, KS 66202

Title: D  
Name: ALLEN, STEVEN  
Address: 700 CHILDREN'S DRIVE  
City-St-Zip: COLUMBUS, OH 43205

Title: D  
Name: WORLEY, STEVE  
Address: 200 HENRY CLAY DRIVE  
City-St-Zip: NEW ORLEANS, LA 70118

Title: D  
Name: DUROVICH, CHRIS  
Address: 1935 MEDICAL DISTRICT DRIVE  
City-St-Zip: DALLAS, TX 75235

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: CRAIG F. FISCHER

VCFO

04/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date