FILED
May 22, 2003 8:00 A.M.
Secretary of State

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F02000002024

1. Entity Name
DRG MANAGEMENT CORPORATION OF INDIANA

Principal Place of Business	Mailing Address
4301 NORTH FEDERAL HIGHWAY, SUITE 200 FT. LAUDERDALE, FL 33308	169 SOUTH JEFFERSON STREET BERNE, IN 46711

2. Principal Place of Business	3. Mailing Address
941 NE 19th Ave.	
Suite, Apt. #, etc. 304	Suite, Apt. #, etc.
City & State Ft. Lauderdale, FL	City & State
Zip / Country 33304 / Broward	Zip / Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 35-2094446 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	Name: Lee Ann Donathan Street Address (P.O. Box Number Is Not Acceptable): 941 NE 19th Ave, #304 City: Fort Lauderdale FL Zip Code: 33304

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: Lee Ann Donathan
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, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ROBINSON, JOHN S 169 SOUTH JEFFERSON STREET BERNE, IN 46711	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KITT, TYLER 169 SOUTH JEFFERSON STREET BERNE, IN 46711	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	400015[illegible] Change ☐ Addition 05/22/03--01067--002 **550.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MUSELMAN, THOMAS C 169 SOUTH JEFFERSON STREET BERNE, IN 46711	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 400019741004 05/22/03--01067--002 **550.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MCKEE, DAVID 103 NORTH PEARL STREET BIG SANDY, TX 75755	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MUSELMAN, ROGER C 306 EAST PARR ROAD BERENE, IN 46711	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [illegible] CFO 5/16/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #