

F07000002550

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(Address)

(Address)

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RECEIVED
07 MAY 14 PM 3:22
DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2007 MAY 14 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAY 15 2007

CT Corporation

May 14, 2007

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

Re: Order #: 6908308 SO
Customer Reference 1: None Given
Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

[REDACTED] (DE)

[REDACTED]
[REDACTED]

Inland American Healthcare Corp. (DE)
Qualification
Florida

[REDACTED] (E)

[REDACTED]
[REDACTED]

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TALLAHASSEE, FLORIDA

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Jennifer

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Inland American Healthcare Corp.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 26-0141731
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 27, 2007 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon filing.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2901 Butterfield Road, Oak Brook, Illinois 60523
(Principal office address)
2901 Butterfield Road, Oak Brook, Illinois 60523
(Current mailing address)
8. To act as a holding company for entities engaged in the acquisition, development, disposition, brokerage, ownership and management of real estate.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: C T Corporation System
- Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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TALLAHASSEE, FLORIDA

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By: _____

Carrie Brey

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Thomas P. McGuinness, Lori Foust and Brenda Gail Gujral

Address: 2901 Butterfield Road

Oak Brook, Illinois 60523

Director: Marcel Verbaas

Address: 750 S. Orlando Avenue, Suite 201

Winter Park, FL 32789

B. OFFICERS

CEO & President: Marcel Verbaas

Address: 750 S. Orlando Avenue, Suite 201

Winter Park, FL 32789

Senior Vice President: Edwin Hendriksen

Address: 750 S. Orlando Avenue, Suite 201

Winter Park, FL 32789

Secretary: Scott Wilton

Address: 2901 Butterfield Road, Oak Brook, IL 60523

Treasurer: Lori Foust

Address: 2901 Butterfield Road, Oak Brook, Illinois 60523

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. Scott Wilton, Secretary

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INLAND AMERICAN HEALTHCARE CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF APRIL, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

4342214 8300

070488017



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5631440

DATE: 04-27-07