

P18000000984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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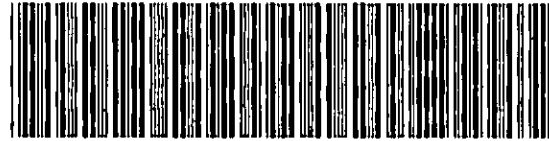
(Business Entity Name)

(Document Number)

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FEB 27 2018

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Health Care Administrators Association  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Susan Crolla

Name of Person

Health Care Administrators Association

Firm/Company

5353 Wayzata Blvd., Ste. 350

Address

Minneapolis, MN 55416

City/State and Zip Code

scrolla@hcaa.org

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Susan Crolla at (850) 999-2333  
Name of Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$70.00 Filing Fee

\$78.75 Filing Fee &  
Certificate of Status

☒ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:*

Heath Care Administrators Association, Inc.

1. \_\_\_\_\_  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

\_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California 3. 95-3642817  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/22/1998 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. Jan. 1, 2018  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 2976 Compton Court - Tallahassee, FL 32309  
(Principal office address)

5353 Wayzata Blvd., Ste. 350 - Minneapolis, MN 55416

\_\_\_\_\_  
(Current mailing address, if different)

8. Trade Association  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

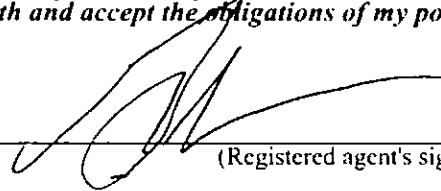
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Susan Crolla

Office Address: 2976 Compton Court  
Tallahassee, Florida 32309  
(City) (Zip Code)

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.*

  
\_\_\_\_\_  
(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 addresses of officers and/or directors

**A. DIRECTORS**

Carol Berry - CEO

Chairman: \_\_\_\_\_  
6155 Lockhurst Drive - Woodland Hills, CA 91367  
Address: \_\_\_\_\_

Susan Crolla - Executive Director

Vice Chairman: \_\_\_\_\_  
2976 Compton Court - Tallahassee, FL 32309  
Address: \_\_\_\_\_

La Rea Albert

Director: \_\_\_\_\_  
3650 Old Bullard Road - Suite 320 - Tyler TX 75701  
Address: \_\_\_\_\_

Jim Farley

Director: \_\_\_\_\_  
29055 Clemens Road - Westlake, OH 44145  
Address: \_\_\_\_\_

**B. OFFICERS**

Steve Rasnick

President: \_\_\_\_\_  
14710 Tamiami Trail N, Ste 201 - Naples, FL 34110  
Address: \_\_\_\_\_

Joanie Verinder

Vice President: \_\_\_\_\_  
12770 Merit Drive - Suite 200 - Dallas TX 75251  
Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Kirti Mutatkar

Treasurer: \_\_\_\_\_  
54 Corporate Park - Irvine CA 92606  
Address: \_\_\_\_\_

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

13. \_\_\_\_\_  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  
Susan Crolla - Executive Director

14. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

ENTITY NAME:

HEALTH CARE ADMINISTRATORS ASSOCIATION

FILE NUMBER: C0994664  
FORMATION DATE: 08/07/1980  
TYPE: DOMESTIC NONPROFIT CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.

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FEB 28 2018  
FEB 28 2018



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of February 06, 2018.

ALEX PADILLA  
Secretary of State