

11/15/21, 12:00 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000421567 3)))



H210004215673ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION**Bellin Psychiatric Center, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

S. FRANKLIN
NOV 16 2021

Electronic Filing Menu

Corporate Filing Menu

Help

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.*

Bellin Psychiatric Center, Inc.

1. _____
(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. WI 3. 39-1657627
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/06/1988 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 744 S. Webster Avenue, Green Bay, WI 54301
(Principal office address)

(Current mailing address, if different)

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

Name: C T Corporation System

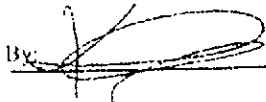
Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

9. 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: 

(Registered agent's signature) Kimberly Bowens, Asst. Secretary

10. 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.

FILED
 2021 NOV 15 PM 3:36
 DEPT. OF STATE
 TALLAHASSEE, FL

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

A. DIRECTORS

Chairman: Susan Gallagher-Lepak

Address: 301 E. St. Joseph Street

Green Bay, WI 54301

Vice Chairman: William Laakso, PsyD

Address: 301 E. St. Joseph Street

Green Bay, WI 54301

Director: William McKinley, JD

Address: 301 E. St. Joseph Street

Green Bay, WI 54301

Director: Sharla Baenen

Address: 301 E. St. Joseph Street

Green Bay, WI 54301

B. OFFICERS

President: Sharla Baenen

Address: 301 E. St. Joseph Street

Green Bay, WI 54301

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

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

12. Sharla Baenen
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Sharla Baenen, President & CEO

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

FILED
2021 NOV 15 PM 3:36
TALLAHASSEE, FL

Exhibit A

to

Application by Foreign Corporation for Authorization to Transact Business in Florida**LISTING OF OFFICERS AND DIRECTORS
OF BELLIN PSYCHIATRIC CENTER, INC.****Officers:**

Susan Gallagher-Lepak, PhD Chair
301 E. St. Joseph Street
Green Bay, WI 54301

William Laakso, PsyD Vice-Chair
301 E. St. Joseph Street
Green Bay, WI 54301

Sharla Baenen President and CEO
301 E. St. Joseph Street
Green Bay, WI 54301

Directors:

William McKinley, JD
301 E. St. Joseph Street
Green Bay, WI 54301

John Paul, JD
301 E. St. Joseph Street
Green Bay, WI 54301

Barb Gilling
301 E. St. Joseph Street
Green Bay, WI 54301

Tara Robertson, PsyD
301 E. St. Joseph Street
Green Bay, WI 54301

David Vander Ploeg
301 E. St. Joseph Street
Green Bay, WI 54301

Sharla Baenen
301 E. St. Joseph Street
Green Bay, WI 54301

Michael Hoffman, MD
301 E. St. Joseph Street
Green Bay, WI 54301

Naciye Kalafat, MD
301 E. St. Joseph Street
Green Bay, WI 54301

Emily Rademacher, DO
301 E. St. Joseph Street
Green Bay, WI 54301

Christine Woleske
301 E. St. Joseph Street
Green Bay, WI 54301

FILED
2021 NOV 15 PM 3:36
CLERK OF DISTRICT COURT
TALLAHASSEE, FL

United States of America
State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, Patti Epstein, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

BELLIN PSYCHIATRIC CENTER, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is October 06, 1988.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and affixed the official seal of the
Department on November 04, 2021.

Patti Epstein

PATTI EPSTEIN, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions

FILED
2021 NOV 15 PM 3:37
CLERK OF STATE
TREASURY

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>

Enter this code: 314035-71F3742D