F24000000738

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W23000168681

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2024 FEB -2 PM 4:10

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 20, 2023

JAMES B. FALAHEE, JR.
301 JOHN STREET
KALAMAZOO, MI 49007 US

SUBJECT: BRONSON HEALTH CARE GROUP, INC.
Ref. Number: W23000168681

We have received your document for BRONSON HEALTH CARE GROUP, INC. and your check(s) totaling $70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least $500 but not more than $1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is $900.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Andrea Andrews
Regulatory Specialist II

Letter Number: 823A00029023

RECEIVED

FEB 02 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bronson Health Care Group, Inc.
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:

James B. Falahee, Jr.
Name of Person

Bronson Health Care Group, Inc.
Firm/Company

301 John Street
Address

Kalamazoo MI 49007
City/State and Zip Code

falaheej@bronsonhg.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James B. Falahee, Jr. at (269) 341-8146
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:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ■ $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:

1. Bronson Health Care Group, Inc.
(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. Michigan
(State or country under the law of which it is incorporated)

3. 38-2418383
(FEI number, if applicable)

4. 2/4/1982
(Date of Incorporation)

5. _____
(Date of duration, if other than perpetual)

6. 12/10/2018
(Date first conducted affairs in Florida if prior to registration. *See sections 617.1501 & 617.1502, F.S. to determine penalty liability.*)

7. 301 John Street Kalamazoo, MI 49007
(Principal office **street** address)

_____
(Current mailing address, if different)

8. Provide health care services
(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: Corporation Service Company (CSC)

Office Address: 1201 Hays Street

Tallahassee (City), Florida 32301 (Zip Code)

2019 FEB -2 PM 4:10

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.

Maria C. Kubly
(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

■Chairman	Name: Nelson Karre		☐Chairman	Name: Michael Odar	
☐Vice Chairman	Address: 301 John Street		☐Vice Chairman	Address: 301 John Street	
☐Director	Kalamazoo MI 49007		☐Director	Kalamazoo MI 49007	
☐President			☐President		
☐Vice President			☐Vice President		
☐Secretary		☐Treasurer	☐Secretary		■Treasurer
☐Other:		☐ Other:	☐Other:		☐Other:

☐Chairman	Name: James L. Liggins, Jr.		☐Chairman	Name: Bill Manns	
■Vice Chairman	Address: 301 John Street		☐Vice Chairman	Address: 301 John Street	
☐Director	Kalamazoo MI 49007		☐Director	Kalamazoo MI 49007	
☐President			■President		
☐Vice President			☐Vice President		
☐Secretary		☐Treasurer	☐Secretary		☐Treasurer
☐Other:		☐ Other:	☐Other:		☐Other:

☐Chairman	Name: Neil Nyberg		☐Chairman	Name:	
☐Vice Chairman	Address: 301 John Street		☐Vice Chairman	Address:	
☐Director	Kalamazoo MI 49007		☐Director		
☐President			☐President		
☐Vice President			☐Vice President		
■Secretary		☐Treasurer	☐Secretary		☐Treasurer
☐Other:		☐ Other:	☐Other:		☐Other:

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. Bill Manns
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

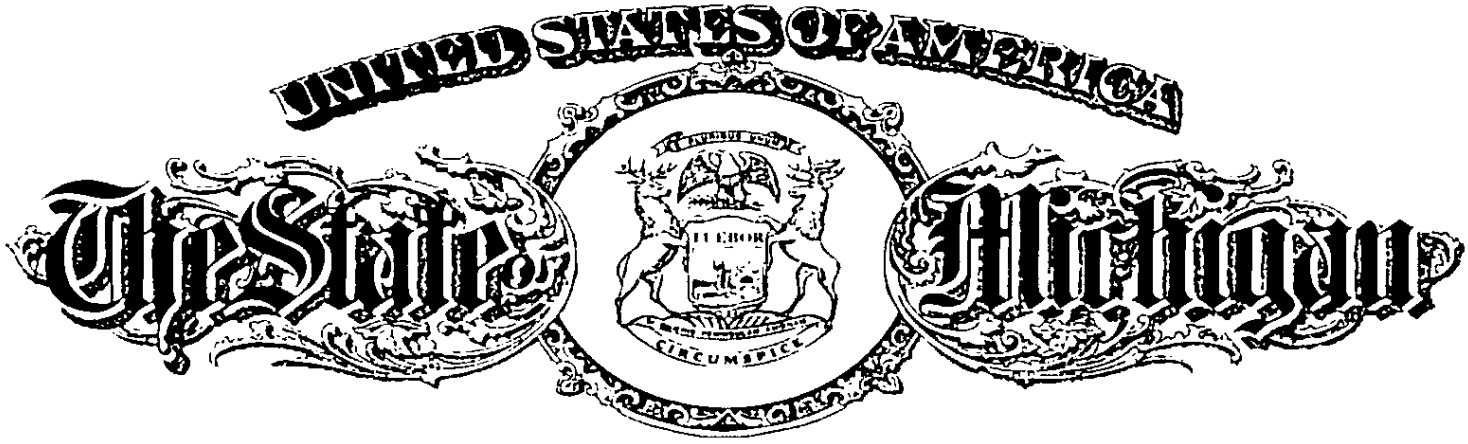
14. Bill Manns, President & CEO
(Typed or printed name and capacity of person signing application)

Item 12 (continued)

Name	Address	Title
Richard Allen	301 John Street Kalamazoo MI 49007	Director
Lynn Chen-Zhang	301 John Street Kalamazoo MI 49007	Director
Randall Eberts, PhD	301 John Street Kalamazoo MI 49007	Director
Katy Fink	301 John Street Kalamazoo MI 49007	Director
Scott Gibson	301 John Street Kalamazoo MI 49007	Director
Jorge Gonzalez, PhD	301 John Street Kalamazoo MI 49007	Director
Brenda Hunt	301 John Street Kalamazoo MI 49007	Director
William Johnston	301 John Street Kalamazoo MI 49007	Director
Mahesh Karamchandani MI	301 John Street Kalamazoo MI 49007	Director
Steven Lins MD	301 John Street Kalamazoo MI 49007	Director
La June Montgomery Tabron	301 John Street Kalamazoo MI 49007	Director
Donald Parfet	301 John Street Kalamazoo MI 49007	Director
Namita Sharma JD	301 John Street Kalamazoo MI 49007	Director
Erick Stewart	301 John Street Kalamazoo MI 49007	Director
L. Marshall Washington PhD	301 John Street Kalamazoo MI 49007	Director
Wiliam Workman DO	301 John Street Kalamazoo MI 49007	Director
Sue Birch Reinoehl	301 John Street Kalamazoo MI 49007	Officer
James B. Falahee, Jr.	301 John Street Kalamazoo MI 49007	Officer
Mike Way	301 John Street Kalamazoo MI 49007	Officer
Becky East	301 John Street Kalamazoo MI 49007	Officer
Cheryl Johnson	301 John Street Kalamazoo MI 49007	Officer

Please note the attached Certificate of Good Standing issued by the Department of Licensing and Regulatory Affairs (LARA) for the State of Michigan is the actual PDF issued to Bronson Health Care Group, Inc. It was provided electronically by the State of Michigan.

Thank you,
Lisa Currie
curriel@bronsonhg.org
269-341-8146



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

BRONSON HEALTH CARE GROUP, INC.

was validly Incorporated on February 4 , 1982 as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1982 PA 162 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand. in the City of Lansing, this 9th day of November , 2023.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau

Sent by electronic transmission

Certificate Number: 23110207707

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.