

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F51961

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: BHC MANAGEMENT COMPANY, INC.

## Current Principal Place of Business:

18500 NE 5TH AVE  
2ND FL  
NORTH MIAMI BEACH, FL 33179 US

## New Principal Place of Business:

## Current Mailing Address:

18500 NE 5TH AVE  
2ND FL  
NORTH MIAMI BEACH, FL 33179 US

## New Mailing Address:

FEI Number: 59-2131467      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HORWITZ, JERROLD I  
18500 N. E. 5TH AVENUE  
NORTH MIAMI BEACH, FL 33179 US

## Name and Address of New Registered Agent:

HORWITZ, JERROLD I  
18500 N. E. 5TH AVENUE  
2ND FLOOR  
NORTH MIAMI BEACH, FL 33179 US

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.

SIGNATURE:

03/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RICHMAN, MARK  
Address: 18500 NE 5TH AVE  
City-St-Zip: N MIAMI BEACH, FL 33179

Title: VD ( ) Delete  
Name: FRIEDMAN, KENNETH C  
Address: 18500 NE 5 AVE  
City-St-Zip: N MIAMI BEACH, FL 33179

Title: SD ( ) Delete  
Name: SHULER, JOHN R  
Address: 18500 NE 5TH AVE  
City-St-Zip: N MIAMI BEACH, FL 33179

Title: T ( ) Delete  
Name: HORWITZ, JERROLD I  
Address: 18500 NE 5 AVENUE  
City-St-Zip: N. MIAMI BEACH, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: HORWITZ, JERROLD I  
Address: 18500 NE 5TH AVENUE, 2ND FL  
City-St-Zip: N MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERROLD I HORWITZ

T

03/19/2009

Electronic Signature of Signing Officer or Director

Date