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! PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9300005662

FIRST HEALTH STRATEGIES OF UTAH, INC.

Principal Place	of Business	Mailing Address	_ -	\$ 1001/60 1/10 16/60 1/111 08/11 00/11 00/11 00/11	0018 (0 121 0 01110 0211	IN 14NI 6NAI
2755 S DECKER LN		3200 HIGHLAND AVE				
STE 8		SUITE 1400 DOWNERS GROVE IL 60515		DO NOT WRITE IN THIS SPACE		
SALT LAKE CITY UT 84119 US		US		3. Date Incorporated or Qualifed		
				12/14/1993		j
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applie	ed For
21		26 3200 Highland	Avenue	87-0439459		pplicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Add	
22		27 Attn: Legal D	ept.			
City & State		City & State 28 Downers Grove	T1.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Ma Added to F	- 1
Zip	Country	Zip	Country	8. This corporation owes the current year Int		-
24	25	60515	ol USA	Personal Property Tax.		No No
24)	9. Name and Address of Current	-1 		10. Name and Address of New Registered	Agent	
			81 Name	•		}
C T CORPORATION SYSTEM			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				·		
PLAN	MAILUN FE 33324		83			
			84 City	FL	85 Zip Coo	de
		CO7 1509 Florido Statutos	the above named con	poration submits this statement for the purpose of	changing its re-	aistered
office or re	edistered agent, or both, in the State o	of Florida. Such change was auth	iorizea by the corporati	ion's board of directors. I hereby accept the appoint	intment as regis	tered
agent. I ai	m familiar with, and accept the obligati	ions of, Section 607.0505, Florid	a Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agent signature require	ed when reinstating) DATE		
SIGNATURE	OFFICERS AND	COLO DET II OPPINIO	egistered Agent signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS APPLICATIONS		
	PD (* *;	COLO DET II OPPINIO		(co which followed by	ND DIRECTORS	S IN 12
12.	PD (* ': CARPENTER, MARY ANN	D DIRECTORS	13.	(co which followed by		
12.	PD (* '; CARPENTER, MARY ANN 3200 HIGHLAND AVE	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	(co which followed by		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the recover or trustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with ap address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

GLEN ALLEN VA 23060

240273-90081-501 F9300005662

FIRST HEALTH STRATEGIES OF UTAH, INC.

Additional Corporate Officers Business Address

Denny Taute Assistant Vice President, Facilities 4141 N. Scottsdale Road Scottsdale, AZ 85251