

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000005662

1. Entity Name

FIRST HEALTH STRATEGIES OF UTAH, INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90004 033 ***150.00

Principal Place of Business

2755 S DECKER LN
STE 8
SALT LAKE CITY UT 84119
US

Mailing Address

3200 HIGHLAND AVE
ATTN:LEGAL DEPT.
DOWNERS GROVE IL 60515-1223
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

87-0439459

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME CARPENTER, MARY ANN
STREET ADDRESS 3200 HIGHLAND AVE
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE VTD
NAME WHITTERS, JOSEPH E
STREET ADDRESS 3200 HIGHLAND AVE
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE VD
NAME WRISTEN, EDWARD L
STREET ADDRESS 3200 HIGHLAND AVE
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE V
NAME DILLS, PATRICK G
STREET ADDRESS 3200 HIGHLAND AVE
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE S
NAME SMITH, SUSAN T
STREET ADDRESS 3200 HIGHLAND AVE
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE AS
NAME COUNCIL, JAMES G
STREET ADDRESS 4300 COX RD
CITY-ST-ZIP GLEN ALLEN VA 23060 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ASSISTANT VICE PRESIDENT
NAME DENNY TAUTE
STREET ADDRESS 4141 N. SCOTTSDALE, STE. 220
CITY-ST-ZIP SCOTTSDALE, AZ 85251 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUSAN T. SMITH

Date

Daytime Phone #

630-241-7900

CR2E034 (9/99)