## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9400003755

1. Corporation Name VENCARE, INC.

Principal Place of Business

3300 PROVIDIAN CENTER 400 W. MARKET ST., LOUISVILLE KY 40202

Mailing Address

3300 PROVIDIAN CENTER

## **FILED** May 11, 1999 8:00 am Secretary of State

05-11-1999 90047 050 \*\*\*150.00



400 W. MARKET ST., STE. 3300 LOUISVILLE KY 40202	400 W. MARKET ST., STE, 3300 LOUISVILLE KY 40202	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  07/18/1994		
US	U\$			
2. Principal Place of BusinessOne Vencor	Place 2a. Mailing AddressOne Vencor Place	4. FEI Number Applied For		
21 680 South Fourth Street	26 680 South Fourth Street	61-1264993 Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status Desired See Required		
City & State 23 Louisville, KY	City & State 28 Louisville, KY	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country  24 40202–2412	Zip Country 29 40202–2412 30 USA	8. This corporation owes the current year Intangible Personal Property Tax.   ☐ Yes ☐ No		
9. Name and Address of C		10. Name and Address of New Registered Agent		
	81 Name	<u> </u>		

C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324

	10. Name and Address of New Registered Agent							
81	Name							
82	Street Address (P.O. Box Number is Not Acceptable)							
83								
84	City FI 85 Zip Code							

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

•							
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable (NOTE:	Registered Agent signature re-	nuired when reinstating)	DATE		
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OF		RS IN 12	
TITLE	VPD	DELETE	1.1 TITLE	See Attached List	☐ Change	Addition	
NAME	BARR, MICHAEL R	Α.	1,2 NAME	566 115664124			
STREET ADDRESS	AAA MA MADWEE OF OTE AAAA		1.3 STREET ADDRESS				
CITY-ST-ZIP	LOUISVILLE KY		1,4 CITY-ST-ZIP				
TITLE	S	☐ DELETE	2.1 TITLE		Change	Addition	
NAME	LANDENWICH, JOSEPH L.		2.2 NAME				
STREET ADDRESS	400 W. MARKET ST., STE. 3300		2,3 STREET ADDRESS	One Vencor Place, 680 South Fourth Street			
CITY-ST-ZIP	LOUISVILLE KY 40202		2. 4 CITY-ST-ZIP			_	
TITLE	VP	☐ DELETE	3.1 TITLE		Change	☐ Addition	
NAME	WINDHORST, DAVID R		3.2 NAME				
STREET ADDRESS	ss 400 W. MARKET ST., STE. 3300		3.3 STREET ADDRESS	One Vencor Place, 680 South Fourth Street			
CITY-ST-ZIP	LOUISVILLE KY		3.4. CITY-ST-ZIP				
TITLE	DP	DELETE	4.1 TITLE	See Attached List	Change	Addition	
NAME	LUNSFORD, W. BRUCE		4, 2 NAME	occ neadled page			
STREET ADDRESS	.400, W., MARKET ST., STE. 3300		4,3 STREET ADDRESS				
CITY-ST-ZIP	LOUISVILLE KY		4.4 CITY-ST-ZIP				
TITLE	VPD	Lx DELETE	5.1 TITLE	See Attached List	☐ Change	Addition	
NAME	reed, W. Earl III		5.2 NAME				
STREET ADDRESS	400 W MARKET ST., STE. 3300		5.3 STREET ADDRESS				
CITY-ST-ZIP	LOUISVILLE KY		5.4 CITY-ST-ZIP			pro-10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE	AS	☐ DELETE	6.1 TITLE		🔀 Change	Addition	
NAME	FORCE, JILL L.		6.2 NAME	0 M TO 0 1 TO 1 O			
STREET ADDRESS	400 W. MARKET ST., STE. 3300		6.3 STREET ADDRESS	One Vencor Place, 680 South Fourth Street			
CITY OF 710	LOUISEVILLE KY		6.4 CITY-ST-ZIP				

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 receiver or trustee empowered 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 an address, with all other like empowered.

SIGNATURE:

Brian K. Wood

(502) 596-7300 Daytime Phone #

**DIRECTORS**:

Jill L. Force

Director

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

James H. Gillenwater, Jr.

Director

**Primary** 

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

Richard A. Schweinhart

Director

Primary

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Address:

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OFFICERS:

William M. Altman

Vice President, Compliance

Primary

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Address:

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Frank W. Anastasio

President, Ancillary Services

Primary

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Frank J. Battafarano

President, Hospital Division

Primary

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Address:

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Richard E. Chapman

Senior Vice President, Information Systems

Primary Address: One Vencor Place, 680 South Fourth Street Louisville, KY 40202-2412

J. Guy Conces

Vice President, Clinical/Business Systems Development

Primary

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R. John Cowgill

Vice President, Facilities Management

Primary

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Address:

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Donald D. Finney

President, Nursing Center Division

Primary

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Jill L. Force

Senior Vice President, General Counsel and Secretary

Primary

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Senior Vice President, Planning and Development

Primary Address: One Vencor Place, 680 South Fourth Street

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Primary

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Primary

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Vice President, Human Resources

Primary

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Senior Vice President, Pacific Region

Primary

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Assistant Secretary

Primary

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Richard A. Lechleiter

Vice President, Finance and Corporate Controller

Primary

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Katheryn J. Markham

Vice President, Information Systems

Primary

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Senior Vice President, Midwest Region

Primary

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Address:

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Susan E. Moss

Vice President, Corporate Communications

**Primary** 

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Anne M. Nipp

Senior Vice President, South Region

Primary

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James J. Novak

Senior Vice President, Southeast Region

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John V. Oliver

Senior Vice President, Southwest Region

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Senior Vice President, Mid America Region

Primary Address:

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Senior Vice President, North Region

Primary

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M. Suzanne Riedman

Vice President and Assistant General Counsel

Primary

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Address:

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Thomas M. Schuhmann

Vice President, Reimbursement

Primary

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Richard A. Schweinhart

Senior Vice President and Chief Financial Officer

Primary

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David R. Windhorst

Vice President, Financial Systems Development

Primary

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Brian K. Wood

Vice President, Tax

Primary

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Address:

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Edward L. Kuntz

Chief Executive Officer and President

Primary Address:

One Vencor Place, 680 South Fourth Street

ess: Louisville, KY 40202-2412

T. Stephen Turner

Senior Vice President, West Region

Primary

One Vencor Place, 680 South Fourth Street

Address: Louisville, KY 40202-2412

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