## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F9500001451

2000 UNIFORM BUSINESS REPORT (UBR)					7 FILED		
DOCUMENT # F9500001451  1. Entity Name  THERATX MEDICAL SUPPLIES, INC.					Apr 27, 2000 8:00 am Secretary of State		
					04-27-2000 90024 031 ***150.00		
Principal Plac	ce of Business	Mailing Address	-				
one vencor plage 80 South Fourth Street Ouisville Ky 40202-2412 IS		ONE VENCOR PLACE 680 SOUTH FOURTH STREET LOUISVILLE KY 40202-2407 US			T A BANGER HITR FRANK BRANK BRANK BRANK BRANK BRANK BRANK HIDIK BIRBAT BANJA ANGA HIDIK		
2. Principal Place of Business		3. Mailing Address 680 South Fourth-Street		t			
Suite, Apt.	#, etc.	Suite Apt. #, etc. ATTN: Tax Dept			DO NOT WRITE IN THIS SPACE		
City & State		City & State Louisville, KY		4.	FEI Number 59-3290533 Applied For Not Applicable		
Zip	Country	Zip 40202-2412	Country USA	5.	Certificate of Status Desired S8.75 Additional Fee Required		
	6. Name and Address of Currer			7.	Name and Address of New Registered Agent		
	~;>		Name	~~.·			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			Street Addre	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 re	egistered office or reg	istered ag	gent, or both, in the State of Florida.		
SIGNATURE .	Signature, typed or printed name of registered age	nt and title if applicable (NOTE:	Registered Agent signature re-	quired when r	reinstating) DATE		
Tax filing r	oration is eligible to satisfy its Intangib requirement and elects to do so. ria on back)	After MAY 1, 200	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta		10. Election Campaign Financing Trust Fund Contribution.   \$5.00 May Be Added to Fees		
11.	OFFICERS AN	D DIRECTORS	12.	ΑĽ	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ALTMAN, WILLIAM M ONE VENCOR PLACE, 680 S 4 LOUISVILLE KY 4202-412	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILLENWATER, JAMES H JR ONE VENCOR PLACE, 680 S 4 LOUISVILLE KY 4202412	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHWEINHART, RICHARD A ONE VENCOR PLACE, 680 S 4 LOUISVILLE KY 4202412	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FORCE, JILL L ONE VENCOR PLACE, 680 S 4 LOUISVILLE KY 40202	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	See	$\square$ Change $X \!$		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LADT, THOMAS T ONE VENCOR PLACE, 680 S 4 LOUISVILLE KY 4202412	X Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	See	☐ Change ☐		
TITLE NAME STREET ADDRESS	S LADENWICH, JOSEPH L ONE VENCOR PLACE, 680 S 4	☐ Delete	TITLE NAME STREET ADDRESS		☐ 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.

CITY-ST-ZIP

SIGNATURE:

**LOUISVILLE KY 40202** 

CITY-ST-ZIP

Brian K. Wood SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

00

502-596-7300

Daytime Phone #

Richard Gurka

Senior Vice President, Central Region

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

Vincent S. Hambright

Senior Vice President, Pacific Region

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

Edward L. Kuntz

Chief Executive Officer and President

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

R. Daniel Lacy

Vice President, Finance

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

Joseph L. Landenwich

**Assistant Secretary** 

Primary

680 South Fourth Street

Address:

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

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M. Suzanne Riedman

Senior Vice President and General Counsel

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

TheraTx Medical Supplies, Inc.

995000000111-1 B0076784 Wednesday, February 02, 2000

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Vice President, Reimbursement

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

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

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Senior Vice President and Chief Financial Officer

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

Keith M. Sherman

Vice President, Human Resources and Labor Relations

**Primary** 

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

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Vice President, Finance-Vencare Pharmacy

**Primary** Address: 680 South Fourth Street Louisville, KY 40202-2412

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David R. Windhorst

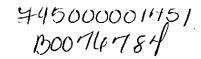
Vice President, Financial Systems Development

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

Brian K. Wood

Vice President, Tax

**Primary** Address: 680 South Fourth Street Louisville, KY 40202-2412



## TheraTx Medical Supplies, Inc.

Wednesday, February 02, 2000

**DIRECTORS**:

James H. Gillenwater, Jr.

Director

**Primary** 

680 South Fourth Street

Address:

Louisville, KY 40202-2412

M. Suzanne Riedman

Director

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

Richard A. Schweinhart

Director

Primary Address:

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OFFICERS:

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Vice President, Compliance

**Primary** Address: 680 South Fourth Street Louisville, KY 40202-2412

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President, Hospital Division

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Vice President, Government Affairs

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