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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002144 (2)

INTEGRATED HEALTH SERVICES AT BIG SAIL, INC.

10065 RED RUN BLVD. 10065 RED RUN BLVD. **OWINGS MILLS MD 21117-4827** OWINGS MILLS MD 21117 3. Date incorporated or Qualified 3a. Date of Last Report 05/02/1995 03/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 52-1923633 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country This corporation has liability for intangible tay under s. 199.032, Yes No 24 25 29 30 Horida Statutes Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 CT CORPORATION SYSTEMS Name 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 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, typed or pooled name of registered a jent and other lapply abli-(NOTE: No a stered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE ☐ Change Addition 1.1 TO LE CIRKA, LAWRENCE P NAME 10065 RED RUN BLVD. STREET ADORESS 1.3 STREET ADDRESS **OWINGS MILLS MD 21117** CITY-ST-ZIP DVAS 🔲 OLLETE Change ____ Addition TITLE 2.1 11113 LEVIN, MARC B NAME 2.2 NAMI 10065 RED RUN BLVD. STREET ADDRESS 2.3 STREET ADDRESS **OWINGS MILLS MD 21117** CITY-ST-ZIP 2. 4 CITY - ST - 7IF DVS 🔲 ortoié Change Addition TITLE **ELKINS, MARSHALL A** NAME 3.2 NAM! 10065 RED RUN BLVD. STREET ADDRESS 3.3 STREET ADDRESS OWINGS MILLS MD 21117 CITY-ST-ZIF 3.4 CHY- \$1-78 DEFETE Change Addition TITLE 4.1 TITLE FULCHINO, MARK 4. 2 NAME NAME 10065 RED RUN BLVD. STREET ADDRESS 4.3 STRELL ADDRESS

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther certify that the information indicated on this annual report or suppremental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

4.4 CITY - ST - 7H

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - 7IP

5.4 CITY - \$1 - ZIP

5.1 THRE

5.2 NAMI

6.2 NAMI

CICNATURE MAN

OWINGS MILLS MD 21117

CAHILL, DENNIS A

10065 RED RUN BLVD.

OWINGS MILLS MD 21117

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

TITLE

NAME

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OWINGS MILLS, MD 21117

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1412)998-857A

Change

Addition

Mar 14 1997 8:00am

Secretary of State