	MONITORIES.	FIERMAYAUSA	220801]	(1 /
	OFIT	FLORIDA DEPARTME			
	DRATION L REPORT	Secretary of		FILED	
		DIVISION OF COR		SECRETARY OF STATE	: .
1996 OCUMENT #F9500XXXX3799				DIVISION OF CORPORATIONS	
OCUM Corporation N	ENT #FG500X	205199		96 JUL 31 PM 12: 2	9
Heal	4h Rider, Inc.				
ncipal Place o		Mailing Address	F.		
		6322 S. 3000 Salt Lake City	1 11 T		
		Salt Land Cit), w.	3. Date Incorporated or Qualified 3a. Date	e of Last Report
30.12 1	L. M.L. IIT		84121	May 10, 1995	Applied For
Principal Plac	ce of Business	28. Mailing Address	000 E.	4. FEI Number 97-0540789	Not Applicable
Salti	Lake City, UI	26 6322 5. 30 Suite, Apt #, etc.	<u> </u>	5. Certificate of Status Desired	\$8.75 Additional
Suite, Apt #.	. etc U	27 N/A		5, Certificate of Status Desiret	Fee Required
City & State		City & State	1.1	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Salt	Lake City, UI	28 Salt Lake C	Country	8. This corporation has liability for intangible	e tax under s 199 032
21P 8417	Country	29 2 USA 3	084121	Florida Statutes Yes No	
		Designation of Agent		10. Name and Address of New Registered	Agent
he Pres	9. Name and Address of Current atice-Hall Corporation W5 St Stc. 105	n System, Inc.	B1 Name	A Date of Not Accordable)	
711 L	115 St Ste. 105	•	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
701 1TV	455ee, FL 32301		83		
lallani	455ee, PL 52 301		84 City	Fi	85 Zip Code
					of changing its registered
1. Pursuant li office or re agent I ar	o the provisions of Sections 607 050: egistered agent, or both, in the State in familiar with, and accept the oolige	2 and 607 1508, Florida Statutes of Florida, Such change was au ations of, Section 607 0505, Flor	thorized by the corpora ida Statutes	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE .	Signature, typed or printed name of registered age	ol and the tapplicable INOTE			
	OFFICERS AN		Registered Agent signature requ	uired when reinstaling) DATE	ND DIRECTORS IN 12
12.	OFFICENS AN	D DIRECTORS	13.	ured when (erstaing) DATE ADDITIONS/CHANGES TO OFFICERS AP	ND DIRECTORS IN 12
			13. 1 1 DTUE		ND DIRECTORS IN 12 Change Addition
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SIGNATURE: BIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayting Prone #



HEALTHRIDER, INC.

BOARD OF DIRECTORS

Gary H. Smith 6322 South 3000 East Salt Lake City, UT 84121

Harold P. McEwan 6322 South 3000 East Salt Lake City, UT 84121

Christopher F. Robinson 6322 South 3000 East Salt Lake City, UT 84121

Tony Rodda 6322 South 3000 East Salt Lake City, UT 84121

OFFICERS

Christopher F. Robinson-President 6322 South 3000 East Salt Lake City, UT 84121

Helen Smith-Vice President 6322 South 3000 East Salt Lake City, UT 84121

C. Reed Brown-Secretary 6322 South 3000 East Salt Lake City, UT 84121

Mark C. McBride-Treasurer 6322 South 3000 East Salt Lake City, UT 84121