

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91838 021 \*\*\*150.00

<b>DOCUMENT #</b> F95000004192
<b>1. Entity Name</b> HEALTH RESOURCE PUBLISHING COMPANY

**DO NOT WRITE IN THIS SPACE**

**70050980**

<b>2. Principal Place of Business</b> 200 CARILLON PARKWAY Suite, Apt. #, etc.	<b>3. Mailing Address</b> 200 CARILLON PARKWAY Suite, Apt. #, etc.
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**DO NOT WRITE IN THIS SPACE**

<b>City &amp; State</b> ST PETERSBURG FL	<b>City &amp; State</b> ST. Petersburg, FL	<b>4. FEI Number</b> 59-3310028	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>Zip</b> 33716	<b>Country</b> USA	<b>Zip</b> 33716	<b>Country</b> USA
		<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**DO NOT WRITE IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

<b>Name</b> NATIONAL REGISTERED AGENTS INC
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 526 EAST PARK AVENUE
<b>City</b> TALLAHASSEE
<b>FL</b> <b>Zip Code</b> 32301

**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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

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

(NOTE: Registered Agent signature required when reinstating)

**DATE**

<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Florida Department of State</b>	<b>9. Election Campaign Financing</b> <b>Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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<b>10. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	CEO MCCLOREY, MICHAEL 515 OLIVE STREET #1212 ST LOUIS, MO 63101	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	PC00 NEAL, GEORGE 515 OLIVE STREET #1212 ST LOUIS, MO 63101	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	S LUCAS-TEBEAU, ROBYN 515-OLIVE STREET #1212 ST LOUIS, MO 63101	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	CFOT WOLF, CHRISTOPHER 200 CARILLON PARKWAY ST PETERSBURG FL 33716	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	VP PORT, JOSEPH 200 CARILLON PARKWAY ST PETERSBURG FL 33716	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	AS BRISTOW, THOMAS 200 CARILLON PARKWAY ST PETERSBURG FL 33716	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	

**12. 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 10 or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

THOMAS BRISTOW

4/22/03

727-579-5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

attachment 70050980  
\$950006641 92

HEALTH RESOURCE PUBLISHING COMPANY  
LIST OF OFFICERS AND DIRECTORS  
FEIN: 59-3310028

OFFICERS:

<u>NAME</u>	<u>TITLE</u>	<u>BUSINESS ADDRESS</u>
Michael McClorey	CEO	515 Olive St. #1212 St. Louis, MO 63101
George Neal	President and COO	515 Olive St. #1212 St. Louis, MO 63101
Joseph P. Port	Vice President	200 Carillon Parkway St. Petersburg, FL 33716
Edward Rhoads	Sr. Vice President - Business Development	515 Olive St. #1212 St. Louis, MO 63101
Robyn Lucas-Tebeau	Secretary	515 Olive St. #1212 St. Louis, MO 63101
Christopher W. Wolf	CFO / Treasurer	200 Carillon Parkway St. Petersburg, FL 33716
Jennifer Wahlen	Assistant Secretary	200 Carillon Parkway St. Petersburg, FL 33716
Thomas Bristow	Assistant Secretary	200 Carillon Parkway St. Petersburg, FL 33716

DIRECTORS:

Daniel D. Granger	Director	200 Carillon Parkway St. Petersburg, FL 33716
Frank Barker	Director	200 Carillon Parkway St. Petersburg, FL 33716
Thomas Mindrum	Director	200 Carillon Parkway St. Petersburg, FL 33716
Richard George	Director	200 Carillon Parkway St. Petersburg, FL 33716
Michael T. McClorey	Director	515 Olive St. #1212 St. Louis, Mo 63101
George Neal	Director	515 Olive St. #1212 St. Louis, MO 63101