2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 30, 2000 8:00 am **DOCUMENT** # F95000004968 1. Entity Name **Secretary of State** CNR HEALTH, INC. 03-30-2000 90064 035 ***158.75 Principal Place of Business Mailing Address 20900 Swenson Dr., #400 20900 Swenson Dr., #400 Waukesha, WI 53186 Waukesha, WI 53186 2. Principal Place of Business 3. Mailing Address 20900 Swenson Dr., #400 20900 Swenson Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 400 400 4. FEI Number 39-0445022 City & State City & State Applied For Waukesha, WI Waukesha, WI 53186 53186 Not Applicable Zip Country 53186 \$8.75 Additional 5. Certificate of Status Desired Fee Required 53186 Waukesha 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) Insurance Commissioner Capitol Tallahassee, FL 32399-0300 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 Delete Addition Cavaiani, Ralph Hartert, James E. 2514 S. 102nd Street STREET ADDRESS STREET ADDRESS 20900 Swenson Dr., #400 Milwaukee, Wi 53227 CITY-ST-ZIP CITY-ST-ZIP Waukesha, WI 53186 TITLE Delete TITLE Change Addition Tyler, Barbara NAME Hanosn, Gail NAME STREET ADDRESS STREET ADDRESS 401 W. Michigan St. 20900 Swenson Dr., #400 CITY-ST-7/P CITY-ST-ZIP <u>Milwaukee, Wr 53203</u> Waukesha, WI 53186 TITLE D * Delete TITLE ☐ Change ★ Addition NAME NAME-Kiehl, Dianne Hefty, Tom STREET ADDRESS STREET ADDRESS 401 W. Michigan St 2514 S. 102nd St., #100 CITY-ST-7IP CITY-ST-ZIP <u>Milwaukee, WI 53203</u> <u>Milwaukee, WI 53227</u> TIT1 F Delete
De TITLE [] Change ★ Addition Formisano, Roger Thompson, Elizabeth NAME STREET ADDRESS STREET ADDRESS 401 W. Michigan St 20900 Swenson Dr., #400 CITY-ST-ZIP CITY-ST-ZIP Milwaukee, WI 53203 Waukesha, WI 53186 Delete ☐ Change X Addition Cavaiani, Ralph NAME Bablitsch, Steve STREET ADDRESS STREET ADDRESS 2514 S. 102nd Str., #100 401 W. Michigan St. CITY-ST-ZIP CITY-ST-7IP Milwaukee, WI_53227 Milwaukee, WI 53203 Delete Addition TITLE Change Burnett, David 2514 S. 102nd St., #100 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Milwaukee, WI 53227 ith his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if i, with all other like ampowered. 13. Thereby certify that the information supplied will indicated on this report or supplemental report of the corporation or the receiver or trustee e

of Signing OFFICER OR DISECTOS ident

(414) 546-8765

Daytime Phone #

3/15/2000

changed, or on an attachmer

SIGNATURE:

Affach, C0048516 #F95000004968

STATE OF FLORIDA 2000 Uniform Business Report (UBR)

Addendum

Question #12

Officers and Directors

V

Hekkers, Victoria 20900 Swenson Dr., #400 Waukesha, WI 53186 Addition

V

Melton, Jack 2514 S. 102nd Street, #100 Milwaukee, WI 53227

Addition

D-outside

Dix, Ronald 4545 W. Brown Deer Rd. Milwaukee, WI 53223 Addition