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May 10, 1999 8:00 am  
Secretary of State

05-10-1999 90132 011 \*\*\*150.00



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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F96000000479			
1. Corporation Name CONTINUUM BEHAVIORAL HEALTHCARE CORPORATION			
Principal Place of Business ONE MAYNARD DRIVE PARK RIDGE NJ 07656 US		Mailing Address 3414 PEACHTREE RD. NE SUITE 1400 ATLANTA GA 30326 US	
2. Principal Place of Business 21 6950 COLUMBIA GATEWAY DR Suite, Apt. #, etc. 22 SUITE 400 City & State 23 COLUMBIA MD Zip Country 24 21046 25 USA		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30 USA	
9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT SANFORD, CHARLOTTE A. 3914 PEACHTREE ROAD, NE, SUITE 1400 ATLANTA GA 30326	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GERATY, RONALD D 1 MAYNARD DRIVE PARK RIDGE NJ	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	AS ANCOSKY, MICHELLE H 3414 PEACHTREE ROAD, N.E., SUITE 1400 ATLANTA GA 30326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAS BEDENBAUGH, JAMES R. 3414 PEACHTREE RD, NE, SUITE 1400 ATLANTA GA 30326	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FUZZELL, CHEIRE 3414 PEACHTREE RD, NE, STE 1400 ATLANTA GA 30326	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	AS LANG, MARIAN 3414 PEACHTREE ROAD, NE, SUITE 1400 ATLANTA GA 30326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FASSLER, DAVID G. 101 FEDERAL STREET BOSTON MA 02110	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	V LAZAROFF, DENNIS J. 13736 RIVERPORT DRIVE, SUITE 400 MARYLAND HEIGHTS, MO 63403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CUMMINGS, ANDREW M. 1 MAYNARD DRIVE PARK RIDGE NJ 07656	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	S CUMMINGS, ANDREW M. 666 THIRD AVENUE - 5TH FLOOR NEW YORK NY 10017

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michelle H. Ancosky 4/7/99

(404) 891-9200  
Daytime Phone #

CR2E034 (11/98)

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## **CONTINUUM BEHAVIORAL HEALTHCARE CORPORATION**

### **ADDITIONAL OFFICERS**

<b>NAME</b>	<b>TITLE</b>	<b>ADDRESS</b>
Edward J. Christie	Senior Vice President Mid-Atlantic Region	3 Friends Lane, Suite 200 Newtown, PA 18940
Wayne E. Feest	Senior Vice President Central Region	3850 Priority Way South Drive, Suite 200 Indianapolis, IN 46250
Joel Kostin	Senior Vice President Southeast Region	3000 Aerial Center Parkway, Suite 120 Morrisville, NC 27560
Jim Van Halderen	Senior Vice President Western Region	7400 East Orchard, Suite 2500 Englewood, CO 80111
Monica M. Megivern	Vice President	20 Burlington Mall Road, Suite 335 Burlington, MA 01803