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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

F96000004983 (0) DOCUMENT #

FOUNDATION HEALTH FACILITIES, INC.

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3400 DATA DR	
DAMPUN PADRONA PA OSERA	

Dringing | Place of Business

Mailing Address

FILED May 15 1998 8:00am Secretary of State



3400 DATA DR RANCHO CORDOVA CA 95670 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/27/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 225 North Main Street 225 North Main Street 68-0390438 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. **\$8.75** Additional Certificate of Status Desired 2nd Floor, Legal Dept. 2nd Floor, Legal Dept. Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Pueblo, CO Pueblo. Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible USA 81003 USA Personal Property Tax due June 30. Yes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City 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, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. **PCEO** DELETE X Change TITLE 1.1 TITLE FORGAN, JEFFREY P Jeffrey P. Forgan 12 NAME NAME \$400 DATA DR STREET ADDRESS 1.3 STREET ADDRESS RANCHO CORDOVA CA 1.4 CITY-ST-ZIP CITY-ST-ZIP X DELETE X Addition Change TITLE 2.1 TITLE **ELDER. JEFFREY L** Jay M. Gellert NAME 2.2 NAME 21600 Oxnard Street, Suite 1700 Woodland Hills, CA 91367 3400 DATA DR STREET ADDRESS 2.3 STREE1 ADDRESS RANCHO CORDOVA CA 95670 CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition 3.1 TITLE TITLE **E**RWAY, JOE E 3.2 NAME NAME 3400 DATA DR 3.3 STREET ADDRESS STREET ADDRESS RANCHO CORDOVA CA CITY-ST-ZIP 3 4. CITY - ST- ZIP Change TITLE DELETE 4.1 DTLE Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 52 NAME STREET ADORESS 53 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELFTE ☐ Change TITLE 6.1 THLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - 7IP

14. Thereby certify that the information supplied with the 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 supplied with the 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 supplied under continuous 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 a