

F960 00006871

TODD A. STERZOY
Holland and Knight

(Requestor's Name)
315 South Calhoun Street Suite 600
(Address)
Tallahassee, Florida 32302
(City, State, Zip) (Phone #) 425-5625

400002046934--8
-01/06/97--01045--014
2270.00 *200.00

OFFICE USE ONLY

100002035291--9
-12/20/96--01053--016
2092.50 *122.50

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. CCA of Midwest Inc (Corporation Name) W96-26711 (Document #)

2. _____ (Corporation Name) _____ (Document #)

3. _____ (Corporation Name) _____ (Document #)

4. _____ (Corporation Name) _____ (Document #)

☒ Walk in ☒ Pick up time 4:00

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A. Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED
36 DEC 20 PM 1:05
DIVISION OF CORPORATION

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthum
Secretary of State

December 20, 1996

Backdate

**HOLLAND AND KNIGHT
TODD STERZOY**

SUBJECT: CCA OF MIDWEST, INC.
Ref. Number: W96000026771

We have received your document for CCA OF MIDWEST, INC. and your check(s) totaling \$122.50. However, the document has not been filed and is being retained in this office for the following:

A photocopy of the certificate of existence is not acceptable. *attached is original certificate*

Pursuant to section 607.1502(4) or 617.1502(4), F.S., this office is required to collect a penalty of \$1000 for each year this corporation transacted business in Florida prior to qualification and the appropriate annual report fees that would have been due had the corporation qualified the year it began operation in this state.

However, the \$1000 per year penalty fee is waived, pursuant to laws of Florida 96-212, for any corporation that applies for a certificate of authority between July 1, 1996 and December 1, 1996.

The total amount due this office through December 31, 1996 to cover the back annual report(s) is \$200.00.

If you have any questions concerning the filing of your document, please call (904) 487-6095.

Jennifer Sindt
Document Examiner

Letter Number: 796A00056838

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:

1. CCA of Midwest, Inc
(Name of corporation must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware 3. 65-0609778
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9/13/95 5. PERMANENT
(Date of incorporation) (Duration: Year corp. will cease to exist or perpetual)

6. 9/13/95
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 607.1503, F.S.))

7. 3050 North Horseshoe Drive, Suite 260
Naples FL 33942
(Current mailing address)

8. Healthcare Business
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: CT Corporation System

Office Address: 1200 S. Pine Island Road

Plantation, Florida, 33324
(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

Connie Bryan
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
96 DEC 20 PM 2:54
SECRETARY OF
TALLAHASSEE
FLORIDA

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Director: Gary W Singleton
 Address: 3050 N Horseshoe Drive, Suite 260
Naples, FL 33942

Director: William J. Krystopowicz
 Address: 3050 N. Horseshoe Drive, Suite 260
Naples, FL 33942

Director: David H. Faler
 Address: 3050 N. Horseshoe Drive, Suite 260
Naples, FL 33942

Director: _____
 Address: _____

B. OFFICERS

President: Gary W Singleton
 Address: 3050 N. Horseshoe Drive, Suite 260
Naples, FL 33942

Vice President: David H. Faler
 Address: 3050 N. Horseshoe Drive, Suite 260
Naples, FL 33942

Secretary: William J. Krystopowicz
 Address: 3050 N. Horseshoe Drive, Suite 260
Naples, FL 33942

Treasurer: Timothy Trybus
 Address: 3050 N. Horseshoe Drive, Suite 260
Naples, FL 33942

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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FILED

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

Timothy J. Trybus V.P. Treasurer
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

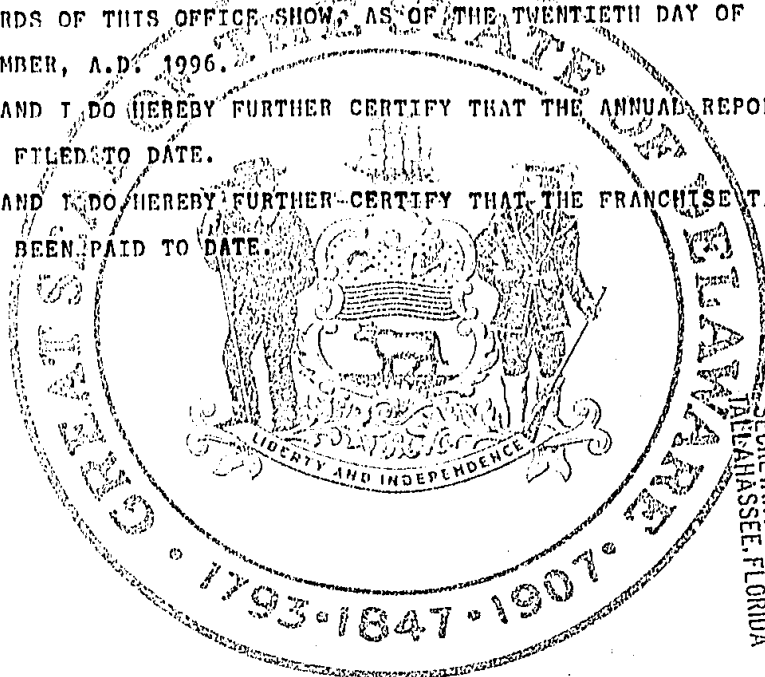
TIMOTHY J. TRYBUS
 (Typed or printed name and capacity of person signing application)

State of Delaware
Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CCA OF MIDWEST, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF DECEMBER, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



FILED
96 DEC 20 PM 2:54
SECRETARY OF STATE
DELAWARE



Edward J. Freel

Edward J. Freel, Secretary of State

2542032 8300

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AUTHENTICATION: 8253675

DATE: 12-20-96