

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90158 013 ***300.00

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DOCUMENT # F97000000361

1. Corporation Name

HAI/BEHAVIORAL HEALTHCARE SOLUTIONS, INC.

Principal Place of Business

10150 S CENTENNIAL PKWY
SANDY UT 84070

Mailing Address

10150 S CENTENNIAL PKWY
SANDY UT 84070

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/21/1997

4. FEI Number

87-0552566

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P
WILLIAMS, JACK D
10150 S CENTENNIAL PKWY
SANDY UT 84070

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DVS
BAYER, GREGORY A
10150 S CENTENNIAL PKWY
SANDY UT 84070

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VDAT
BENDORAITIS, THOMAS MICHAEL
10150 S CENTENNIAL PKWY
SANDY UT 84070

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S
SMITH, BERGETTA JAMES
10150 S CENTENNIAL PKWY
SANDY UT 84070

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

T
SANFORD, CHARLOTTE AMIL
3414 PEACHTREE RD NE #1400
ATLANTA GA 30326

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

V
MCLURE, HOWARD ALEX
3414 PEACHTREE RD NE #1400
ATLANTA GA 30326

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

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☐ Addition

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☐ Addition

☐ Change

☐ Addition

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/99 (801) 256-7488
Date Daytime Phone #

- CR2E034 (11/98)

BEHAVIORAL HEALTHCARE SOLUTIONS, INCORPORATED

(Revised 9-25-98)

Names and Addresses of Directors:

Gregory Allan Bayer
13736 Riverport Drive
Maryland Hts, MO 63043

Thomas Michael Bendoraitis
6950 Columbia Gateway Drive
Columbia, MD 21046

Vincent Love
6950 Columbia Gateway Drive
Columbia, MD 21046

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Names and Addresses of Officers:

Gregory Allan Bayer
13736 Riverport Drive
Maryland Hts, MO 63043

President & Asst. Secretary

Thomas Michael Bendoraitis
6950 Columbia Gateway Drive
Columbia, MD 21046

Vice President & Asst. Treasurer

Charlotte Amile Sanford
3414 Peachtree Road NE, Suite 1400
Atlanta, GA 30326

Treasurer

Christine R. Ching
10150 S. Centennial Parkway
Sandy, UT 84070

Secretary

James Richard Bedenbaugh
3414 Peachtree Road NE, Suite 1400
Atlanta, GA 30326

Asst. Secretary

Linton Clarke Newlin
3414 Peachtree Road NE, Suite 1400
Atlanta, GA 30326

Vice President

Margie Smith
3414 Peachtree Road NE, Suite 1400
Atlanta, GA 30326

Vice President & Asst. Secretary