

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90205 001 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000006065

1. Entity Name

Rexburg Health Care Management Corp.

Principal Place of Business

Mailing Address

1661 Old Henderson Road
Columbus, OH 43220

40171

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

31-1343735

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Kevin R. Lottes, Esquire
4001 Tamiami Trail North, Suite 300
Naples, FL 34103

Name
Kevin G. Coleman, Esquire

Street Address (P.O. Box Number is Not Acceptable)
4001 Tamiami Trail North, Suite 300

City Naples

FL

Zip Code
34103

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 re-nating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DP
Ralph E. Hazelbaker
1661 Old Henderson Road
Columbus, OH 43220 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
V
R. Brian Hazelbaker
32325 S. Const. Hwy Ste. 204
Laguna Beach, CA 92677 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
S
Sharon A. Everett
1661 Old Henderson Road
Columbus, OH 43220 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
T
K. Robert Evenson, Jr.
1661 Old Henderson Road
Columbus, OH 43220 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 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

Date

Daytime Phone #

CR2E034 (11/00)