

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90139 004 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000260

1. Entity Name Specialized Care Services, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9900 Bren Road East

Suite, Apt. #, etc.

MN008-T410

City & State

Minnetonka, MN

Zip

55343

Country

USA

3. Mailing Address

9900 Bren Road East

Suite, Apt. #, etc.

MN008-T410

City & State

Minnetonka, MN

Zip

55343

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
41-1921983

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name

C T Corporation System

Street Address (P.O. Box Number Is Not Acceptable)
1200 South Pine Island Road

City
Plantation

FL

Zip Code
33324

**DO NOT WRITE
IN THIS SPACE**

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 N/A

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President David S. Wichmann 9900 Bren Road East Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President John W. Kelly 9900 Bren Road East Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer George L. Mikan, III 9900 Bren Road East Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Timothy F. Ryan 9900 Bren Road East Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Ronald B. Colby 9900 Bren Road East Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Stephen J. Hemsley 9900 Bren Road East Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other lines empowered.

SIGNATURE:

Timothy F. Ryan, Secretary

April 22, 2002 (952) 936-1820

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)