

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F99000000640**

1. Entity Name:

KELSON PHYSICIAN PARTNERS, INC.**FILED**
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90058 020 ***150.00

Principal Place of Business

Mailing Address

**90 STATE HOUSE SQUARE
10TH FL
HARTFORD CT 06103****90 STATE HOUSE SQUARE
10TH FL
HARTFORD CT 06103-3709**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

06-1389869

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. 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	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PCD	CREASEY, E H	90 STATE HOUSE SQ., 10TH FL	HARTFORD CT	<input type="checkbox"/> Delete	VTSD	KINELL, JEFFREY W	90 STATE HOUSE SQ., 10TH FL	HARTFORD, CT 06103	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
VD	KINELL, JEFFREY W	90 STATE HOUSE SQ., 10TH FL	HARTFORD CT	<input type="checkbox"/> Delete	AS	HUGHES, PAUL A	90 STATE HOUSE SU, 10TH FL	HARTFORD, CT 06103	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
ASD	HUGHES, PAUL A	90 STATE HOUSE SQ., 10TH FL	HARTFORD CT	<input type="checkbox"/> Delete	D	FAUST, HALLEY S	1 NORTHWESTERN BLVD, STE 203	BLOOMFIELD, CT 06002	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Delete	D	CRITES, ALAN W	3000 SAND HILL RD, BLDG 3, STE 225	MENLO PARK, CA 94025	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Delete	D	LOTHROP, DONALD J	3000 SAND HILL RD, BLDG 1, STE 135	MENLO PARK, CA 94025	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Delete	D	LEVIN, PHILIP A	4601 SHERIDAN ST, STE 400	HOLLYWOOD, FL 33021	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> 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

Paul A. Hughes 1/25/00 860-692-4304

Date

Daytime Phone #

F99000000640 422831

ATTACHMENT TO FLORIDA 2000 UNIFORM BUSINESS REPORT

KELSON PHYSICIAN PARTNERS, INC.

FEDERAL IDENTIFICATION NO. 06-1389869

DOCUMENT NO. F99000000640

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVERMAN, JAMES 520 LAKE COOK RD, STE 450 DEERFIELD, IL 60015	XX ADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SALTZMAN, EDWARD J 12827 NW CINNAMON WAY PALM CITY, FL 34990-4880	XX ADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHESSIN, ROBERT 15 CORPORATE DR TRUMBULL, CT 06611	XX ADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, JOHN S 300 SAND HILL RD, BLDG 1, STE 275 MENLO PARK, CA 94025	XX ADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRAKASH, GAUTAM 83 WALNUT ST WELLESLEY HILLS, MA 02181	XX ADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HODGE, RONALD POTOMAC TOWER, 1001 19TH STREET NORTH ARLINGTON, VA 22209	XX ADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZENTNER, GARY 3150 CNG TOWER, 625 LIBERTY AVENUE PITTSBURGH, PA 15222	XX ADDITION