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May 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M90511 (0)

1. Corporation Name

PRINCIPAL HEALTH CARE OF FLORIDA, INC.

Principal Place of Business

711 HIGH ST  
WOREIGHTON. LAW DEPT  
DES MOINES IA 50392  
US

Mailing Address

711 HIGH STREET  
C/O CREIGHTON. LAW DEPT.  
DES MOINES IA 50392-0300  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/21/1988

4. FEI Number

42-1341161

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 state if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME LINDE, KENNETH J.  
STREET ADDRESS 711 HIGH ST  
CITY-ST-ZIP DES MOINES IA ☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD  
NAME TAYLOR, SHARON I.  
STREET ADDRESS 711 HIGH ST  
CITY-ST-ZIP DES MOINES IA ☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VT  
NAME GOLTZ, DAVID W  
STREET ADDRESS 711 HIGH ST  
CITY-ST-ZIP DES MOINES IA ☒ DELETE

3.1 TITLE V  
3.2 NAME WEISS, DAVID L.  
3.3 STREET ADDRESS 711 HIGH STREET  
3.4 CITY-ST-ZIP DES MOINES, IA ☐ Change ☒ Addition

TITLE VS  
NAME HOFFMAN, JOYCE N.  
STREET ADDRESS 711 HIGH ST  
CITY-ST-ZIP DES MOINES IA ☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DVAS  
NAME MRIZEK, ROBERT  
STREET ADDRESS 711 HIGH ST  
CITY-ST-ZIP DES MOINES IA ☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V  
NAME WHITTY, STEVEN C  
STREET ADDRESS 711 HIGH ST  
CITY-ST-ZIP DES MOINES IA ☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

SEE ATTACHMENT A

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.

SIGNATURE

02/24/98

515/247-5111

CP2E034 (10/97)

**Attachment A**  
**Principal Health Care of Florida, Inc.**  
**Directors and Officers**

**24-Feb-98**

**Director**

**Name, Title, and Date Elected**

<b>Kenneth Jon Linde</b>	12/17/97
Chairman	
<b>Robert James Mrizek</b>	12/17/97
<b>Sharon Irene Taylor</b>	12/17/97

**Officer**

**Name, Title, and Date Elected**

<b>Kenneth Jon Linde</b>	12/17/97
President	
<b>Sharon Irene Taylor</b>	12/17/97
Senior Vice President	
<b>Steven Clark Whitty</b>	12/17/97
Vice President - Marketing and Sales	
<b>David Lee Weiss</b>	12/17/97
Vice President - Planning and Development	
<b>Joyce Nixson Hoffman</b>	12/17/97
Vice President and Corporate Secretary	
<b>Robert James Mrizek</b>	12/17/97
Vice President, Counsel, and Assistant Secretary	
<b>Craig Lawrence Bassett</b>	12/17/97
Treasurer	
<b>Mary Louise Bricker</b>	12/17/97
Assistant Corporate Secretary	
<b>Michael John Burgoyne</b>	12/17/97
Corporate Controller	
<b>Ronald M. Chaffin</b>	12/17/97
Regional Vice President	
<b>Charles David Roberts</b>	12/17/97
Regional Vice President	
<b>Stephen L. Bennett</b>	12/17/97
Executive Director	
<b>Kenneth Stephen Bryant</b>	12/17/97
Executive Director	
<b>Rebecca Hodges McQueen</b>	12/17/97
Executive Director	
<b>Stephen Haines Nolte</b>	12/17/97
Executive Director	
<b>Robert George Neuhardt</b>	12/17/97
Medical Director	
<b>Allan Thomas Boshell</b>	12/17/97
General Manager	

**Corporation Address/Address for all Directors and Officers**

711 High Street, Des Moines, Iowa 50392