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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 22 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02249

(1)

HEALTH QUEST MANAGEMENT CORPORATION IV

| Principal Place of Business Mailing Address 315 W JEFFERSON BLVD 315 W JEFFERSON BLVD SOUTH BEND IN 46801-1586 SOUTH BEND IN 46801-1512  |  |   |   |  |  |  |
|--|--|---|---|--|--|--|
|  |  |   |   | }  |  |  |
|  |  |   |   | 3. Date Incorporated or Qualified 06/01/1984   | 3a. Date of Las<br>05/29/199             |  |
| ·  |  | 2a. Mailing Address   |   | 4, FEI Number  | ļ  | Applied For                                    |
| Saitr_Aat_   | # etc  | Suite, Apt. #, etc.   |   | 35-1421058   | \$8.7                                    | Not Applicab  5 Additional                     |
| 1  |  | 27  |   | 5. Certificate of Status Desired   | 7  | Required                                       |
| City & Stat  | 0  | City & State  |   | 6. Election Campaign Financing   | \$5.0                                    | 00 May Be                                      |
| l ,  | and the second s | 28  | T   | Trust Fund Contribution  | Add                                      | led to Fees                                    |
| _ Z(μ<br>  | Country  | Zip   | Country<br>30   | 8. This corporation has fiability for  | intangible tax undi<br>☐ Yes  ☐ No       | er s. 199 032,                                 |
| i  | 25  <br>9. Name and Address of Curre   | <del></del>   | [30]  | Florida Statutes  10. Name and Address of New Re                                       |  |  |
| KFL  | LY, THOMAS   |   | 81 Name   |  |  |  |
|  | 9 S TAMIAMI TRAIL  |   | B2 Street Add   | onna VIIet<br>Iress (P.O. Box Number is Not Acceptab                                   | ale)                                     |  |
|  | ASOTA FL 33581   |   | <u> </u>  | 979 S. Tamiami Trail   |  |  |
|  |  |   | 83  |  |  |  |
|  |  |   | 84 City   |  | - 85 2                                   | Zip Code                                       |
|  |  |   | S   | arasota  | FL "                                     | Zip Code<br>34231                              |
| <ol> <li>Pursuant office or r</li> </ol>   | to the provisions of Sections 607.05<br>registered agent, or both, in the Stati  | 02 and 607.1508, Florida Statuti<br>e of Florida. Such change was a | es, the above-named corp<br>authorized by the corpora   | poration submits this statement for the p<br>tion's board of directors. I hereby accep | ourpose of changir<br>of the appointment | ng its register<br>i as registered             |
|  |  |   | orida Statutes.   | 0.1.   | 1 10 0                                   |  |
| <b>IGNATURE</b>  | Donna Vliet, Admini  | ISTRATOR  | yoma IX   | ut 7   | 1-10-9                                   | /  |
|  |  |   |   | ired when reinstation)   |  |  |
| 2.   | 10 M   | ND DIRECTORS  | E: Prigistered Agent signature requi  | ired when reinstating)  ADDITIONS/CHANGES TO OFFICE                                    |  |  |
|  | 10 M   |   | . <del></del>   |  |  | TORS IN 12                                     |
| lt F   | OFFICERS AN  | ND DIRECTORS  | 13.   |  | CERS AND DIRECT                          | TORS IN 12                                     |
| EF<br>(M)  | OFFICERS AN  | ND DIRECTORS  | 13.<br>1.1 TITLE  |  | CERS AND DIRECT                          | TORS IN 12                                     |
| EF<br>ME<br>BEET ADDRESS   | OFFICERS AN<br>PO<br>GARATONI, LAWRENCE H.   | ND DIRECTORS  | 13. 1.3 TIFLE 1.2 NAME  |  | CERS AND DIRECT                          | TORS IN 12                                     |
| EF<br>ME<br>BEET ADDRESS<br>FY-\$1-ZIP   | OFFICERS AN<br>PD<br>GARATONI, LAWRENCE H.<br>315 W. JEFFERSON BLVD.<br>S. BEND IN<br>VD   | ND DIRECTORS  | 13. 1.3 TITLE 1.2 NAME 1.3 STREET ADDRESS   |  | CERS AND DIRECT                          | FORS IN 12<br>ge ∐ Addi                        |
| LEF<br>AMI<br>BEET ADSIRESS<br>FY - ST - ZHP<br>TLE  | OFFICERS AN<br>PD<br>GARATONI, LAWRENCE H.<br>315 W. JEFFERSON BLVD.<br>S. BEND IN<br>VD<br>WRIGHT, ANTHONY  | ND DIRECTORS  | 13. 1.3 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP   |  | CERS AND DIRECT                          | FORS IN 12<br>ge ∐ Addi                        |
| EF<br>MI<br>REEF ADORESS<br>FY - ST - ZEP<br>ICE   | PD GARATONI, LAWRENCE H. 315 W. JEFFERSON BLVD. S. BEND IN VD WRIGHT, ANTHONY 315 W JEFFERSON BLVD   | ND DIRECTORS  | 13. 1.3 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE   |  | CERS AND DIRECT                          | FORS IN 12<br>ge ∐ Addi                        |
| EF  ME FACTORESS  IY-ST-ZIP  LEF  IME  FEET ACTORESS  IY-ST-ZIP  | PD GARATONI, LAWRENCE H. 315 W. JEFFERSON BLVD. S. BEND IN VD WRIGHT, ANTHONY 315 W JEFFERSON BLVD S BEND IN   | ND DIRECTORS  DELETE  DELETE  | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP   |  | CERS AND DIRECT                          | TORS IN 12<br>ge ☐ Addi<br>ge ☐ Addi           |
| EF  ME ADDRESS IN STEZE ILE  ME ADDRESS IN STEZE ILE  ME FET LABORESS IN STEZE IN ST | PD GARATONI, LAWRENCE H. 315 W. JEFFERSON BLVD. S. BEND IN VD WRIGHT, ANTHONY 315 W JEFFERSON BLVD S BEND IN SD  | ND DIRECTORS  | 13. 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   |  | CERS AND DIRECT                          | TORS IN 12<br>ge ☐ Addi<br>ge ☐ Addi           |
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Charles M. Loeser