

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P09066 (2)

1. Corporation Name
AHC MANAGEMENT COMPANY



Principal Place of Business
**5785 N. LINDERO CANYON RD.
WESTLAKE VILLAGE CA 91362
US**

Mailing Address
**5785 N. LINDERO CANYON RD.
WESTLAKE VILLAGE CA 91362
US**

3. Date Incorporated or Qualified 02/12/1986	3a. Date of Last Report 05/01/1995
4. FEI Number 95-4049804	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Zip 29
Country 25	Country 30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 607.0506, Florida Statutes.

SIGNATURE _____ DATE _____
Signed and typed by the person executing this report as required by Chapter 607, Florida Statutes. Typed Registered Agent signature required when recording. Date

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD TUTHILL, WILLIAM E. 5785 N. LINDERO CANYON RD. WESTLAKE VILLAGE CA <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO TUTHILL, WILLIAM E. 5785 N. LINDERO CANYON RD. WESTLAKE VILLAGE CA <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD REINMUTH, CRAIG A. 5785 N. LINDERO CANYON RD. WESTLAKE VILLAGE CA <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS KRETZMER, ANTHONY 5785 N. LINDERO CANYON RD. WESTLAKE VILLAGE CA <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY - ST - ZIP	COO/CEO President Director Reinmuth, Craig A. 5785 N. Lindero Canyon Rd. Westlake Village, CA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY - ST - ZIP	CFO/Secretary Director Kretzmer, Anthony 5785 N. Lindero Canyon Rd. Westlake Village, CA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY - ST - ZIP	Executive VP Officer Corrigan, Paul 5785 N. Lindero Canyon Rd. Westlake Village, CA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY - ST - ZIP	Dir. of Regional Operations Officer Yoder, Douglas 5785 N. Lindero Canyon Rd. Westlake Village, CA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 creditor 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: **A. KRETZMER** 4/4/1996 (818) 735-5254
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone Number

CR2E034 (12/95)