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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Scoretary of State
Division OF CORPORATIONS

1996

DOCUMENT # **P09066**

(2)

Corporation Name

AHC MANAGEMENT COMPANY

Principal Place of Business Maling Address							- LIBARIED LIK DELID JERK BOTIE BRAID BIAR BIDII					
5785 N. LIN	DERO CANYON RD. VILLAGE CA 91362	5785 N	5785 N. LINDERO CANYON RD. WESTLAKE VILLAGE CA 91362									
08		US						Date Incorporated or Qualified 02/12/1986		te of Last F 05/01/1		
2. Principal Pla	ce of Business	2a. Mailing	Address				4.	FEI Number			Applied For	
21		26					95-4049804				Not Applicable	
Suite, Apt. #	r, etc.	F the	Suite, Apt #, etc.				5.	Certificate of Status Desired			5 Additional Required	
City & State		City &	Siale				6	Election Campaign Financing				
23		28					•	Trust Fund Contribution			00 May Be ed to Fees	
Zip	Country	Zip	· · · · · · · · · · · · · · · · · · ·	Country			8.	This corporation has liability for	ıntangible			
24	25	29	3	80			1		□ No			
	9. Name and Address of Curre	nt Registered A	gent		ı		10.	Name and Address of New F	legistered	i Agent		
				81		Name						
CT CORPORATION SYSTEM				82		Street Addre	t Address (P.O. Box Number is Not Acceptable)					
	OUTH PINE ISLAND ROAD			83	ļ							
PLANIA	ATION FL 33324			63								
				84		City			FI	85 Z	Zip Code	
11 Porsuant b	o the provisions of Sections 607.050	2 and 607 1508	Florida Statutes	the above :	L	med corpora	ation s	submits this statement for the nu			registered office	
or registere	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change	e was authorized.	by the corp	or	ation's board	d of d	irectors. Thereby accept the app	ointment a	s registere	d agent. I am	
	п, ала ассерстве оолдыныгь от, вес	tion eov.cocc, ri	idinaa Statutes									
SIGNATURE :	Syndrine by indicriptoriotic energy to entrage	n a to the diagon labile.	[NOTE	Francisco I Ago		godin telja od	estant pe	ersteldig	DATE			
12.	OFFICERS AN	ID DIRECTORS		13.				ADDITIONS/CHANGES TO OFF	ICERS AN			
TITLE	CD		DELETE	1 1 TIFLE						Change	Addition	
NAME	TUTHILL, WILLIAM E.			1.2 NAME								
STREET ADDRESS	5785 N. LINDERO CANYON	I RD.		1.3 STREET	1 4[DORESS						
C-TY-ST-ZIP	WESTLAKE VILLAGE CA		ED DELETE	_14CHY_S	SI:	ZIP .		4.0			- Addison	
TITLE	CEO	Ľ	X DELETE	2 111115						Change	Addition	
NAME	TUTHILL, WILLIAM E. 5785 N. LINDERO CANYON	LDD		2.2 NAME								
STREET ADDRESS	WESTLAKE VILLAGE CA	I RD.		2.3 STREET								
CHY+ST-ZIP TITLE	VD	· · · · · · · · · r	DELETE	24 CITY -S	51-					Change	Addition	
NAME	REINMUTH, CRAIG A.			3.2 NAME				/CEO President ector		LAS O ISING		
STREET ADDRESS	5785 N. LINDERO CANYON	I RD.		3.3 SIRLE	LA				•			
ÇITY-ST-ZIP	WESTLAKE VILLAGE CA			3.4 City - S		2⊪ 5 W	78. 168	nmuth, Craig A 5 N. Lindero C tlake Village,	anyo	n Ra.		
TITLE	VS) DELETE	4 1 10 LE			FO	/Secretary Div	ecto	Change	Addition	
NAME	Kretzmer, anthony			4.2 NAMÉ		ì	Kre	/Secretary Directory Anthony	7			
STREET ADDRESS	5785 N. LINDERO CANYON	N RD.		4.3 S1H£E!	: Aí	nnarks E	578	15 N. Lindero (canyo	n Rd	•	
CITY - ST - ZIP	WESTLAKE VILLAGE CA			4.4 CITY - S	ST.	76° V	ves	stlake Village	, CA			
TITLE		[DELETE	5 ' H1LF			Exe	ecutive VP Off	icer	Change	Addition	
NAME				5.2 NAME			Co	rrigan, Paul 85 N. Lindero		_		
STREET ADDRESS				53 STALE		CORESS	578	85 N. Lindero	Canyo	on Rd	l -	
CITY-ST-ZIP			ግግ <u>በር</u> ተርተር	5.4 CITY - S	ST-	712		stlake Village		f Chanc	Add as	
TITLE		Į.	DELETE	6 1111.6			Di	r. of Regional erations Offic	er	Change	Addition	
NAMÉ OTRALLARONOGO				62 NAME		Libration	- Y O	der. Douglas			_	
STREET ADDRESS				63 STREET			57	'85 N. Lindero	Cany	on Re	a.	
CITY-ST-ZIF 14. I do hereb	ty certify that the information supplied	with this filing is	voluntanly furnish	64 CiTr - S led and doe	25	not qualify fo	or the	estlake Village exemption stated in Section 119	.07(3)(k). F	Iorida Stat	utes. I further	
certify that	the information indicated on this and Lans an officer of the corp	nual report or sup	iplemental annual reiser or trustee e	report is tru	ue to	and accurations	te and	i that my signature shall have the	same legi Ibrida Stati	al effect as	if made under	
appears in	Block 12 or Glod 13 of changed, or	on an attachmer	t with an address	S.	• • •			Elizabeth and Stables Age 1	CRON		,,	
			3 N						/ 🔻			

SIGNATURE:

SIGNATURE AND TYPED CAPRINTED MANE OF SIGNING OFFICER OR DIRECTOR

4/4/1996 (818)735-5454

CR2E034 (12/95)