

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10891

FILED
Feb 17, 2006
Secretary of State

Entity Name: UNITED MEDICAL RESOURCES, INC.

Current Principal Place of Business:

5151 PFEIFFER RD
CINCINNATI, OH 45242

New Principal Place of Business:

Current Mailing Address:

5151 PFEIFFER RD
CINCINNATI, OH 45242

New Mailing Address:

C/O TERESA JULKOWSKI
9900 BREN ROAD E (MN008-T202)
MINNETONKA, MN 55343

FEI Number: 31-1078580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: GLUCKMAN, VICTORIA B
Address: 5151 PFEIFFER RD
City-St-Zip: CINCINNATI, OH 45242

Title: AS () Delete
Name: VINCENT, GEORGE H
Address: DINSMORE & SHOHL 1900 CHEMEA CTR
City-St-Zip: CINCINNATI, OH 45202

Title: S () Delete
Name: GLUKMAN, JACK
Address: 231 ALBERT SABIN WAY, M.L. 528
City-St-Zip: CINCINNATI, OH 45267

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GLUCKMAN, VICTORIA B
Address: 5151 PFEIFFER RD
City-St-Zip: CINCINNATI, OH 45242

Title: AS (X) Change () Addition
Name: LUIS, JUANITA B
Address: 9900 BREN ROAD E
City-St-Zip: MINNETONKA, MN 55343

Title: S (X) Change () Addition
Name: MCDONNELL, MICHAEL J
Address: 5901 LINCOLN DR
City-St-Zip: EDINA, MN 55436

Title: TREA () Change (X) Addition
Name: OBERRENDER, ROBERT W
Address: 9900 BREN ROAD EAST
City-St-Zip: MINNETONKA, MN 55343

Title: DIR () Change (X) Addition
Name: WICHMANN, DAVID S
Address: 5901 LINCOLN DR.
City-St-Zip: EDINA, MN 55436

Title: DIR () Change (X) Addition
Name: SHEEHY, ROBERT J
Address: 5901 LINCOLN DR.
City-St-Zip: EDINA, MN 55436

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUANITA B. LUIS

AS

02/17/2006

Electronic Signature of Signing Officer or Director

_____ Date