

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P29513

FILED
Apr 29, 2003
Secretary of State

Entity Name: AMERICAN HEALTH ASSISTANCE FOUNDATION, INCORPORATED

Current Principal Place of Business:

15825 SHADY GROVE RD.
STE. 140
ROCKVILLE, MD 20850 US

New Principal Place of Business:

22512 GATEWAY CENTER DRIVE
CLARKSBURG, MD 20871 US

Current Mailing Address:

15825 SHADY GROVE RD.
STE. 140
ROCKVILLE, MD 20850 US

New Mailing Address:

22512 GATEWAY CENTER DRIVE
CLARKSBURG, MD 20871 US

FEI Number: 23-7337229

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MICHAELS, EUGENE H
Address: 9104 GOSHEN VALLEY DRIVE
City-St-Zip: GAITHERSBURG, MD 208821446

Title: VD () Delete
Name: RAYMOND, CLAYTON,
Address: 806 POTOMAC RIDGE CT.
City-St-Zip: STERLING, VA 210641386

Title: SD () Delete
Name: FELICIANO, PETER J.,
Address: 2417 DOHERTY WAY
City-St-Zip: HENDERSON, NV 89014

Title: TD () Delete
Name: KUYKENDALL, ERNEST R. .
Address: 6 MONTGOMERY VILLAGE AVENUE, #660
City-St-Zip: GAITHERSBURG, MD 20879

Title: D () Delete
Name: NUNEZ, LOYS PHD
Address: 1228 MINOR ST
City-St-Zip: MEMPHIS, TN 38111

Title: D () Delete
Name: RICE, JONATHAN
Address: 450 SEVENTH AVE 4301
City-St-Zip: NEW YORK, NY 10123

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MICHAELS, EUGENE H
Address: 22512 GATEWAY CENTER DRIVE
City-St-Zip: CLARKSBURG, MD 20871

Title: VD (X) Change () Addition
Name: RAYMOND, CLAYTON
Address: 22512 GATEWAY CENTER DRIVE
City-St-Zip: CLARKSBURG, MD 20871

Title: SD (X) Change () Addition
Name: FELICIANO, PETER J
Address: 22512 GATEWAY CENTER DRIVE
City-St-Zip: CLARKSBURG, MD 20871

Title: TD (X) Change () Addition
Name: KUYKENDALL, ERNEST R
Address: 22512 GATEWAY CENTER DRIVE
City-St-Zip: CLARKSBURG, MD 20871

Title: D (X) Change () Addition
Name: NUNEZ, LOYS PHD
Address: 22512 GATEWAY CENTER DRIVE
City-St-Zip: CLARKSBURG, MD 20871

Title: D (X) Change () Addition
Name: RICE, JONATHAN
Address: 22512 GATEWAY CENTER DRIVE
City-St-Zip: CLARKSBURG, MD 20871

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUGENE H MICHAELS

PD

04/29/2003

Electronic Signature of Signing Officer or Director

Date

BRIAN K REGAN, PHD - DIRECTOR
22512 GATEWAY CENTER DRIVE
CLARKSBURG, MD 20871

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22512 GATEWAY CENTER DRIVE
CLARKSBURG, MD 20871