

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90058 027 ***150.00

DOCUMENT # **P39686**

1. Corporation Name

SUNDANCE REHABILITATION CORPORATION

Principal Place of Business

**101 SUN AVE NE
ALBUQUERQUE NM 87109
US**

Mailing Address

**101 SUN AVE NE
LEGAL DEPT
ALBUQUERQUE NM 87109
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/14/1992

4. FEI Number

06-1310410

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

23 Zip Country

City & State

28 Zip Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **AS** ☐ DELETE
NAME **MICHAEL T BERG**
STREET ADDRESS **101 SUN AVE NE**
CITY-ST-ZIP **ALBUQUERQUE NM 87109**

TITLE **P** ☐ DELETE
NAME **KNISS, DAVID C.**
STREET ADDRESS **15851 DALLAS PKWY #240**
CITY-ST-ZIP **DALLAS TX**

TITLE **VP** ☐ DELETE
NAME **WARRICK, WILLIAM C.**
STREET ADDRESS **101 SUN AVE NE**
CITY-ST-ZIP **ALBUQUERQUE NM 87109**

TITLE **S** ☐ DELETE
NAME **MANN, NIKKI J**
STREET ADDRESS **101 SUN AVE NE**
CITY-ST-ZIP **ALBUQUERQUE NM 87109**

TITLE **D** ☒ DELETE
NAME **LEVIN, ROBERT A**
STREET ADDRESS **101 SUN AVE NE**
CITY-ST-ZIP **ALBUQUERQUE NM 87109**

TITLE **VPT** ☒ DELETE
NAME **MCINTEER, WARREN H**
STREET ADDRESS **101 SUN AVE NE**
CITY-ST-ZIP **ALBUQUERQUE NM 87109**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **5495 Beltline, Suite 380**
2.3 STREET ADDRESS **Dallas, TX 75240**
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **D**
5.3 STREET ADDRESS **Mark G. Wimer**
5.4 CITY-ST-ZIP **101 Sun Avenue, NE
Albuquerque, NM 87109**

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME **VPT**
6.3 STREET ADDRESS **Matthew G. Patrick**
6.4 CITY-ST-ZIP **101 Sun Avenue, NE
Albuquerque, NM 87109**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver 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, with all other like empowered.

SIGNATURE:

Michael T. Berg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael T. Berg, Asst. Sec. 2/2/99 505-821-3355

Date

Daytime Phone #

CR2E034 (1/1/98)

247150-90058-27
P39686

**SUNDANCE REHABILITATION CORPORATION
OFFICERS AND DIRECTORS**

<u>Position</u>	<u>Name</u>	<u>Address</u>	<u>Term</u>
President	David Kniess	5495 Beltline, Suite 380 Dallas, TX 75240	Until successor is duly elected and qualified
Vice President and CFO	Robert D. Woltil	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified
Vice President and Treasurer	Matthew G. Patrick	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified
Assistant Treasurer	D. Craig Hayes	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified
Vice President and Controller	William C. Warrick	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified
Secretary	Nikki J. Mann	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified
Assistant Secretary	Michael T. Berg	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified
Assistant Secretary	Jeffrey C. Gilmore	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified
Director	Mark G. Wimer	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified
Director	Robert D. Woltil	101 Sun Avenue NE Albuquerque, NM 87109	Until successor is duly elected and qualified