

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

APPROVED  
AND  
FILED

96 JAN 29 PM 3: 20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000033538 (8)

1. Corporation Name:

NATIONAL MEDICAL SERVICES, INC.



Principal Place of Business

2700 COLORADO AVENUE  
SANTA MONICA CA 90404

Mailing Address

2700 COLORADO AVENUE  
SANTA MONICA CA 90404

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/07/1993

3a. Date of Last Report

04/27/1995

4. FEI Number

95-4458028

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION FL 33324

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 of the person named as registered agent and the corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
FOCHT, MICHAEL H SR  
STREET ADDRESS  
2700 COLORADO AVE  
CITY-STATE-ZIP  
SANTA MONICA CA 90404

TITLE ☐ DELETE

NAME  
ANDERSONS, MARIS  
STREET ADDRESS  
2700 COLORADO AVE  
CITY-STATE-ZIP  
SANTA MONICA CA 90404

TITLE ☐ DELETE

NAME  
SD  
BROWN, SCOTT M  
STREET ADDRESS  
2700 COLORADO AVE  
CITY-STATE-ZIP  
SANTA MONICA CA 90404

TITLE ☒ DELETE

NAME  
VP  
TIDIKIS, FRANK  
STREET ADDRESS  
2700 COLORADO AVE  
CITY-STATE-ZIP  
SANTA MONICA CA 90404

TITLE ☐ DELETE

NAME  
AS  
SILVER, RICHARD B  
STREET ADDRESS  
2700 COLORADO AVE  
CITY-STATE-ZIP  
SANTA MONICA CA 90404

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

Senior VP & Asst.  
Treasurer

Senior Vice President

Senior VP & CFO  
Raymund L. Mathiasen  
2700 Colorado Avenue, Santa Monica, CA 90404

Vice President

1000001707941  
02/06/96 01000-017  
\*\*\*\*200.00 \*\*\*\*200.00

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Scott M. Brown

1/24/96

Date

(310)998-8427

Daytime Phone

CR2E034 (12/95)