#### 5000012 (Anquestor's Name) (Address) **OFFICE USE ONLY** (City, State, Zip) (Phone #) VCMG Venuce Community Medical Group CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) {Document #} (Corporation Name) (Document #) Walk in Certified Copy Pick up time 75-1204 Mail out Will wait Photocopy Certificate of Status **AMENDMENTS NEW FILINGS** 200001570262 -08/25/95--01088--006 **Profit** Amendment \*\*\*\*\*\*87.50 \*\*\*\*\*87.50 NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Name Availability / Other Merger **Document** Examiner REGISTRATION/ OTHER FILINGS Updater QUALIFICATION NJC Annual Report Updater Foreign NJC Fictitious Name Verlfyer Limited Partnership Acknowledgement NJC Name Reservation Reinstatement W. P. Verifyer NJC

<del>xamines's Initials</del>

Trademark

Other

CR2E031(10/92)



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 29, 1995

Greg M. Marks, Esquire Riscorp Management Services, Inc. 1390 Main Street Sarasota, FL 34236

SUBJECT: VCMG VENICE COMMUNITY MEDICAL GROUP

Ref. Number: W95000017365

We have received your document for VCMG VENICE COMMUNITY MEDICAL GROUP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following: VENICE COMMUNITY, MEDICAL GROUP

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6918.

Letter Number: 495A00040159

Nanette Causseaux Corporate Specialist Supervisor Florida Department of State, Sanda B. Mortham, Secretary of State

# APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK PURSUANT TO CHAPTER 495. FLORIDA STATISTICS

	Pursuant to Ci	IAPTER 495, FLORIDA STATUTES
TO:	Division of Corporations Post Office Box 6327 Taliahassee, FL 32314	Name & address to whom acknowledgement should be sent:
		Grea M. Marka, Esquire
		1390 Main Street
		Sarasota, Florida 34236
	•	(813) 951-2022
		Daytime Telephone number
		PART I
	ant's name: <u>Millennium Heal</u> i	
(b) Applica	nt's business address: 1390 Mair	Street
	Sarasota,	Florida 34236 City/State/Zip
_(c) Applicar	nt's telephone number: (813)	951-2022
Individual General Pa If other than an	rtnership 🔼 Limited Partnership individual,	
		99 (2) Domicile State: Florida
	ployer Identification Number:	59-3287405
(i.e., furni	k to be registered is a service mark, ture moving services, diaper service	the services in connection with which the mark is used: s, house painting services, etc.)
Provide	es medical and/or medical	l administration services to the community
<u>-</u>		
(b) If the mark (i.e., ladie	to be registered is a trademark, the s sportswear, cat food, barbecue gri	goods in connection with which the mark is used: ills, shoe laces, etc.)
•		
c) The mode or Brochu	manner in which the mark is used:( ires, Correspondence, Pre	i.e., labels, decals, newspaper advertisements, brochures, etc.)
<del></del>		
	(0	Continued)

(d) The class(e) in which goods or services fall:  Class 42 Miscallaneous - Medical Services
PART II  1. Date first used by the applicant, predecessor, or a related company(must include month, day and year):  (a) Date first used anywhere:    January 2, 1995   (b) Date first used in Florida:   January 2, 1995
•
2. DISCLAIMER (if applicable) NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " Venice Community,  Medical Group " APART FROM THE MARK AS SHOWN.
, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and opplicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such mear resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct.
Steve Berling President ನ್ಯ
Applicant's signature or authorized person's signature
STATE OF Glanda (List name and title)
COUNTY OF <u>Janasota</u>
On this 38th day of
SHERYL ANN EDWARDS  "Y COMMISSION & CC \$42004  EXPIRES: January 13, 1998  Bonded This Notary Riche Underwitzen  Notary's Printed Name

Seal

My Commission Expires: fan. 13 1998

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Millennium Health Services is committed to leading healthcare providers through the rapidly changing healthcare environment by providing strategic direction, practice management resources and advanced technologies. We give healthcare providers the power to outpace change and allow them to focus on providing quality care while maximizing their resources.

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Venice Community Medical Group (VCMG)

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- Monthly management reports
- Payment review

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- Financial and operational analyses
- Progressive information systems

# Financial Services

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- Payroll
- Financial statements
- **B**udgeting processes
- Leasing and buying decisions

#### Payor Contracting: 7

- Goals establishment
- Contract analysis
- Contract negotiations and management
- Confidential database

## Operational Consulting.

- Strategic planning
- Policy development
- Mergers and acquisitions