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FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 434649 (0)

1. Corporation Name
SERVICE AMERICA NETWORK, INC.

Principal Place of Business 1080 N.W. FIRST AVE. BOCA RATON FL 33432	Mailing Address 2600 CHEMED CENTER 255 E. 5TH ST. CINCINNATI OH 45202
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DO NOT WRITE IN THIS SPACE

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	29
25	30

3. Date Incorporated or Qualified 09/10/1973	
4. FEI Number 59-1486390	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. 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
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PS	<input checked="" type="checkbox"/> DELETE
NAME	JOHNSON, PATRICK L.	
STREET ADDRESS	5220 DRAKE RD.	
CITY-ST-ZIP	CINCINNATI OH 45243	
TITLE	PSD	<input checked="" type="checkbox"/> DELETE
NAME	PATRICK L. JOHNSON	
STREET ADDRESS	7707 ANDES LANE	
CITY-ST-ZIP	PARKLAND FL 33431	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HUTTON, EDWARD L	
STREET ADDRESS	6680 MIRALAKE DRIVE	
CITY-ST-ZIP	CINCINNATI OH 45243	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCMAMARA, KEVIN J	
STREET ADDRESS	7729 ASHLEY VIEW DRIVE	
CITY-ST-ZIP	CINCINNATI OH 45227	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	DALLOB, NAOMI C	
STREET ADDRESS	2311 FAIRVIEW AVE.	
CITY-ST-ZIP	CINCINNATI OH 45219	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

SEE ATTACHED

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.

SIGNATURE: *X Naomi Dallob* **N.C. DALLOB**
SECRETARY 4/14/98 513/762-6556

CR2E084 (10/97)

SERVICE AMERICA NETWORK, INC.

OFFICERS

Vice Chairman
President & Chief Executive Officer
Vice President
Vice President
Vice President
Vice President-Finance, Treasurer & CFO
Vice President-Information Systems
Secretary

Edward L. Hutton
John M. Mount
Robert A. Boettger
Stephen M. Boudreaux
Robert C. Barron
Walter L. Krebs
R. E. Perry
Naomi C. Dallob

DIRECTORS

Edward L. Hutton
Kevin J. McNamara
John M. Mount

OFFICERS & DIRECTORS OF SERVICE AMERICA NETWORK, INC.:

TITLE

NAME

SOCIAL SECURITY NO.

HOME ADDRESS

BUSINESS ADDRESS

Vice Chairman & Director

Edward L. Hutton
SS# 314-03-8958

6680 Miralake Drive
Cincinnati, OH 45243

Chemed Corporation
2600 Chemed Center
255 East 5th Street
Cincinnati, OH 45202

President, CEO & Director

John M. Mount
SS# 288-38-2776

6685 Miralake Drive
Cincinnati, OH 45243

515 N.W. 12th Avenue
Deerfield Beach, FL 33442

Vice President

Robert A. Boettger
SS# 469-44-6250

1080 N.W. 1st Avenue
Boca Raton, FL 33342

Vice President

Stephen M. Boudreaux
SS# 081-40-3867

2980 N.W. 107th Avenue
Coral Springs, FL 33065

1080 N.W. 1st Avenue
Boca Raton, FL 33342

Vice President

Robert C. Barron
SS# 526-44-5861

258 S. E. 4th Avenue
Pompano Beach, FL 33060

3081 McNab Road
Pompano Beach, FL 33069

Vice President-Finance, CFO & Treasurer

Walter L. Krebs
SS# 407-36-2533

4201 N. Ocean Blvd, C-1508
Boca Raton, FL 33431

515 N.W. 12th Avenue
Deerfield Beach, FL 33442

Secretary

Naomi C. Dallob
SS# 280-56-2580

2311 Fairview Avenue
Cincinnati, OH 45219

Chemed Corporation
2600 Chemed Center
255 East 5th Street
Cincinnati, OH 45202

Vice President-Information Systems

R. E. Perry

Director

Kevin J. McNamara
SS# 283-56-9317

2900 Grandin Road
Cincinnati, OH 45208

Chemed Corporation
2600 Chemed Center
255 East 5th Street
Cincinnati, OH 45202