

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 90130 034 \*\*\*158.75

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**DOCUMENT # 434649**



1. Entity 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**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
**59-1486390**

Applied For  
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HUTTON, EDWARD L 6680 MIRALAKE DRIVE CINCINNATI OH 45243</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MCNAMARA, KEVIN J 2900 GRANDIN RD CINCINNATI OH 45208</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS DALLOB, NAOMI C 1060 BARRY LANE CINCINNATI OH 45219</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEE ATTACHED</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X Naomi C. Dallob** **REQUIRED** **SECRETARY** **4/22/2003**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

attachment

SERVICE AMERICA NETWORK, INC. # 434649  
86109677

OFFICERS

Vice Chairman  
President & Chief Executive Officer  
Sr. Vice President, CFO & Treasurer  
Sr. Vice President  
Sr. Vice President  
Secretary

Edward L. Hutton  
John M. Mount  
Vivian M. Psinakis  
Christopher J. Heaney  
Robert C. Barron  
Naomi C. Dallob

DIRECTORS

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

attachment

**SERVICE AMERICA NETWORK, INC.**

#434649  
801091011

**TITLE**

**NAME**

**SOCIAL SECURITY NO.**

**HOME ADDRESS**

**BUSINESS ADDRESS**

**Vice Chairman & Director**

Edward L. Hutton

SS# 314-03-8958

6680 Miralake Drive  
Cincinnati, Ohio 45243

Chemed Corporation  
2600 Chemed Center  
255 East 5<sup>th</sup> Street  
Cincinnati, Ohio 45202

**President, Chief Executive Officer & Director**

John M. Mount

SS# 288-38-2776

6685 Miralake Drive  
Cincinnati, Ohio 45243

515 N.W. 12<sup>th</sup> Avenue  
Deerfield Beach, Florida 33442

**Vice President & Chief Financial Officer**

Vivian M. Psinakis

SS#

515 N.W. 12<sup>th</sup> Avenue  
Deerfield Beach, Florida 33442

**Vice President**

Christopher J. Heaney

SS# 379-58-7592

201 Venetian Dr.  
Delray Beach, FL 33483

1080 N. W. 1<sup>st</sup> Avenue  
Boca Raton, Florida 33342

**Vice President**

Robert C. Barron

SS# 526-44-5861

258 S.E. 4<sup>th</sup> Avenue  
Pompano Beach, Florida 33060

3081 McNab Road  
Pompano Beach, Florida 33069

**Secretary**

Naomi C. Dallob

SS# 280-56-2580

1060 Barry Lane  
Cincinnati, Ohio 45202

Chemed Corporation  
2600 Chemed Center  
255 East 5<sup>th</sup> Street  
Cincinnati, Ohio 4520

**Director**

Kevin J. McNamara

SS# 283-56-9317

949 Edwards Road  
Cincinnati, Ohio 45208

Chemed Corporation  
2600 Chemed Center  
255 East 5<sup>th</sup> Street  
Cincinnati, Ohio 45202