

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F21000006356

**Entity Name:** DEAN HEALTH SYSTEMS, INC.**Current Principal Place of Business:**1808 W BELTLINE HWY  
MADISON, WI 53713-2334**Current Mailing Address:**12800 CORPORATE HILL DR.  
ST LOUIS, MO 63131 US**FEI Number:** 39-1128616**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US*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.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	P
Name	THOMPSON, MARK J
Address	1808 W BELTLINE HWY
City-State-Zip:	MADISON WI 53713-2334

Title	VP
Name	SMOOT, STEVEN R
Address	12800 CORPORATE HILL DR.
City-State-Zip:	ST LOUIS MO 63131

Title	SEC
Name	KIRSCHBAUM, THOMAS N
Address	1808 W BELTLINE HWY
City-State-Zip:	MADISON WI 53713-2334

Title	ASST SEC
Name	LONG, DOUGLAS P
Address	12800 CORPORATE HILL DR.
City-State-Zip:	ST LOUIS MO 63131

Title	T
Name	SMITH, KEVIN L
Address	12800 CORPORATE HILL DR.
City-State-Zip:	ST LOUIS MO 63131

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** DOUGLAS P. LONG**SECRETARY****01/09/2024**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date