## Commonwealth of Kentucky Michael G. Adams, Secretary of Sta

| Michael G.<br>Secretary o<br>P. O. Box<br>Frankfort, KY 4<br>(502) 564<br>http://www.so | of State<br>1150<br>0602-1150<br>3490     | Annual Report<br>Online Filing   | ARP                                |
|---|---|--|------------------------------------|
| Company:<br>Company ID:<br>State of origin:<br>Formation date:<br>Date filed:<br>Fee:   | 0914049<br>Wiscons<br>2/12/201            | IEALTHCARE OF WISCONSIN, INC.<br>5 12:00:00 AM<br>0 5:03:42 PM                 |                                    |
| Principal Office  |   |  |                                    |
| 10701 WEST RESEARCH DRIVE<br>WAUWATOSA, WI 53226  |   |  |                                    |
| WAUWATOSA, W  | 1 33220                                   |  |                                    |
| Registered Agent Name/Address   |   |  |                                    |
| CT CORPORATIC<br>306 W. MAIN STR<br>FRANKFORT, KY                                       | EET, SUITE 512                            |  | JCR                                |
| Current Officers  |   |  |                                    |
| President<br>Secretary  | Ellen Rae Sexton<br>Christina Regina Palr | 9800 HEALTH CARE LANE, M<br>ne-Krizak Post Office Box 9472,Ma<br>MN 55440-9472 | ili Code: MN965-1000, Minneapolis, |
| Treasurer   | Peter Marshall Gill                       | 9900 Bren Road East, Minnet  | onka, MN 55343                     |
| Directors   |   | DED WE FF  |                                    |
| Director  | Catherine Suzanne H                       |  |                                    |
| Director  | Dustin Larry Hinton                       | 10701 WEST RESEARCH DF<br>53226-3440   | IVE, WAUWATOSA, WI                 |
| Director  | Dennis James Moura                        |  | Y,SUITE 400, SOUTHFIELD, MI        |
| Director  | Daniel Brian Ross, M                      |  | waukee, WI 53226                   |
| Director  | Ellen Rae Sexton                          | 9800 HEALTH CARE LANE, N   |                                    |
| Signatures  |   |  |                                    |
| Signature   | Kelly Let                                 | mann   |                                    |
| Title   | POA                                       |  |                                    |