

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214534042

1.) CORPORATION NAME:

Meier Clinics Foundation

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**C T CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1448465**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2100 MANCHESTER ROAD SUITE 1510

CITY/ST/ZIP: WHEATON, IL 60187

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	NANCY BROWN				
TITLE:	PRESIDENT				
ADDRESS:	2100 MANCHESTER ROAD				
	SUITE 1510				
CITY/ST/ZIP/CO:	WHEATON, IL 60187				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	PAUL MEIER MD				
TITLE:	SECRETARY				
ADDRESS:	2099 N COLLINS BLVD SUITE 100				
CITY/ST/ZIP/CO:	RICHARDSON, TX 75080				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	HEATHER GANDY				
TITLE:	CFO				
ADDRESS:	2100 MANCHESTER ROAD				
	SUITE 1510				
CITY/ST/ZIP/CO:	WHEATON, IL 60187				

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	J. ABEDE ALEXANDRE				
TITLE:	DIRECTOR				
ADDRESS:	50 MARSHALL'S CORNER ROAD				
CITY/ST/ZIP/CO:	BROCKTON, MA 02301				

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	ERIC HOBBS				
TITLE:	DIRECTOR				
ADDRESS:	100 E WISCONSIN AVE				
	#3300				
CITY/ST/ZIP/CO:	MILWAUKEE, WI 53202				

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	CHARLIE PLATIPODIS				
TITLE:	DIRECTOR				
ADDRESS:	1913 MIDDLETON CT				
CITY/ST/ZIP/CO:	WHEATON, IL 60187				

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ HEATHER GANDY	HEATHER GANDY, CFO	6/30/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		