2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 13, 2001 08:00 AM DOCUMENT # 672389 1. Entity Name **Secretary of State** F.L.C. BENEVA NURSING PAVILION, INC. Principal Place of Business Mailing Address 910 RIDGEBROOK ROAD 910 RIDGEBROOK ROAD SPARKS MD SPARKS MD 21152 21152 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2124057 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NATIONAL CORPORATE RESEARCH, LTD., INC 1406 HAYS STREET SUITE #2 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL32301 US 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. SIGNATURE 03/13/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (11/00) ☐ Delete TITLE ☐ Addition FILCHINO MAME MARK NAME 910 RIDGEBROOK ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SPARKS MD 21152 CITY-ST-ZIP ☐ Delete D TITLE X Change ☐ Addition NAME ELKINS MARSHALL NAME ELKINS MARSHALL STREET ADDRESS 910 RIDGEBROOK ROAD STREET ADDRESS 910 RIDGEBROOK ROAD CITY-ST-ZIP SPARKS MD 21152 CITY-ST-ZIP SPARKS MD 21152 Delete TITLE SD X Change ☐ Addition MARCB LEVIN NAME LEVIN MARC STREET ADDRESS 910 RIDGEBROOK ROAD STREET ADDRESS 910 RIDGEBROOK ROAD CITY-ST-ZIP SPARKS MD 21152 CITY-ST-ZIP SPARKS MD 21152 ☐ Delete TITLE Change Addition STEPHENSON NAME STREET ADDRESS 910 RIDGEBROOK ROAD STREET ADDRESS CITY-ST-ZIP SPARKS MD 21152 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition PICKETT TAYLOR NAME STREET ADDRESS 910 RIDGEBROOK ROAD STREET ADDRESS CITY-ST-ZIP SPARKS MD 21152 CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: MARK FULCHINO 03/13/2001

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR