2002 UNIFORM BUSINESS REPORT (UBR)

Mar 29, 2002 8:00 am Secretary of State DOCUMENT # 710395 1. Entity Name 03-29-2002 91400 033 ****70 00 VILLA MARIA NURSING AND REHABILITATION CENTER, I Principal Place of Business Mailing Address 1050 NE 125 ST 1050 NE 125 ST N. MIAMI FL 33161 NORTH MIAMI FL 33161 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1284678 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) FITZGERALD, PATRICK J 110 MERRICK WAY SUITE 3-B City Zip Code **CORAL GABLES FL 33134** 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 (NOTE: Registered Agent signature required when reinstating) Stonature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to \$5.00 May Be **FILE NOW: FEE IS \$61.25** Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. CD ☐ Addition ☐ Delete TITLE TIDE PENNEKAMP, TOM NAME NAME STREET ADDRESS 1436 S MIAMI AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL VCSD ☐ Change ☐ Addition ☐ Delete TITLE TITLE HENNESSEY, WILLIAM J. NAME C/O 9401 BISCAYNE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF MIAMI SHORES FL-☐ Change ☐ Addition □ Delete TITLE CATANIA, JOSEPH M NAME 291 NW 43 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COCONUT CREEK FL 33066 Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE

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 empoweled to execute this report as required by Chapter 617, 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.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TOPPOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/02 954-484-1515

Attachment # Document # Document #10395

FY 2002 Uniform Business Report (UBR) Attachment – Additional Directors

D
Rev. Msgr. John Vaughan
c/o 9401 Biscayne Boulevard
Miami Shores, FL 33138

D Ralph E. Lawson c/o 6855 Red Road, Suite 600 Coral Gables, FL 33143

D Mr. Rudy J. Noriega -781-Crandon-Blvd, Apt 405-Key Biscayne, FL 33149

D Ms. Josie Romano Brown c/o 3663 South Miami Avenue Miami, FL 33133

D Mr. Thomas O'Brien 200 Ocean Lane Drive, #409 Key Biscayne, FL 33149

Ms. Patricia Palamara 4200 Mangrum Court Hollywood, FL 33021

D Mrs. Lourdes Sanchez 9540 Journey's End Road Coral Gables, FL 33156

Most Rev. Thomas Wenski c/o 9401 Biscayne Boulevard Miami Shores, FL 33138 D Rev. Msgr. Franklyn M. Casale c/o 16400 N.W. 32 Avenue Miami, FL 33054

Mr. John Johnson, CEO c/o 4725 North Federal Hwy Fort Lauderdale, FL 33307

Bro. Raphael Mieszala c/o 726 NE 1st Avenue Miami, FL 33132

D Mr. Richard Turcotte c/o 9401 Biscayne Boulevard Miami Shores, FL 33138

D Rev. Msgr. Tomas Marin c/o 9401 Biscayne Boulevard Miami Shores, FL 33138

Mr. Bud Farrey c/o 1850 NE 146th Street North Miami, FL 33181

Michael T. Reilly, MD c/o 4875 N Federal Hwy, #800 Fort Lauderdale, FL 33308

D Len T. Sperry, MD, PhD c/o 11300 NE Second Avenue Miami Shores, FL 33161