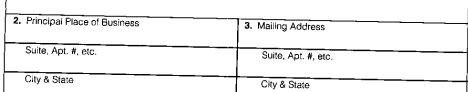
2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766695 1. Entity Name GENESIS HEALTH DEVELOPMENT, INC.

Principal Place of Business 3599 UNIVERSITY BLVD. SOUTH SUITE B JACKSONVILLE FL 32216

Mailing Address

3599 UNIVERSITY BLVD. SOUTH SUITE B JACKSONVILLE FL 32216





05-14-2002 90195 001 *1,050.00

US		U\$						
2. Principal	Place of Business	3. Mailing Address						HAN ANN AN
Suite, Apt. #, etc. City & State			Suite, Apt. #, etc. City & State		1 1001() 16070 ft	iya ayiya aiyia (Biat bili Bibil Bi	HE BEREIT BURTH	BYBNI BYBNI (BB)
		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
		City & State			4. FEI Number 59-2249372 Ap		Applied For	
Zip	Country	Zip	Country		1			Not Applicable
	6. Name and Address of Current R	Indiatored &	<u> </u>		5. Certificate of Sta	_	\$8.75 / Fee Requ	Additional ired
	The state of the s	egistered Agent	Nom		7. Name and Add	ress of New Registered	Agent	
GEIGER, A		Name						
	RPLACE BLVD., SUITE 1500		Stre	Street Address (P.O. Box Number is Not Acceptable)				
rogers,	TOWERS, BAILEY, JONES AND GAY	•						
JACKSON	ALLE FL 32207		City				Zip Co	ode
8. The above	named entity submits this statement for t	ho gurnaga af ala a da				FL	. _,,,, 0.	,d6
	Signature, typed or printed name of registered agent and	title if applicable. (NOTI	E: Registered Agent si	gnature required	when reinstating)	DATE		
Trust Fund			npaign Financin Contribution.	Make Check Payable to Added to Fees Make Check Payable to Department of State				
10.	OFFICERS AND DIRECT	CTORS	11.	A	DDITIONS/CHANGES	S TO OFFICERS AND DIR	ECTORS	N 10
TOLL	BROWN MD, J BROOKS	☐ Delete	TITLE				☐ Change	Addition
STREET ADDRESS	3599 UNIVERSITY BLVD. SOUTH SU	ITE B	NAME STREET ADDRES	٠		•		_
	JACKSONVILLE FL 32216		CITY-ST-ZIP					
	VST REINSCHMIDT, TIMOTHY W.	☐ Delete	TITLE	D		-	Change	Addition
TREET ADDRESS	3599 University Blvd. South Su	ITE R	NAME				ondrige	L Addition
SITY-ST-ZIP	IACKSONVILLE FL 32216	U	STREET ADDRESS CITY-ST-ZIP	S				
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	Baer, douglas M. 1599 University Blvd. South Sui		NAME	$ V ^{3}$	9// 11.	i	hange	Addition
ITY-ST-ZIP	ACKSONVILLE FL 32216	IIE B	STREET ADDRESS	\$ 				
TLE D)P	Delete	CITY-ST-ZIP	 				
AME J	OHNSON, DAVIS M.		TITLE NAME			[Change	☐ Addition
TY-ST-ZIP	599 UNIVERSITY BLVD. SOUTH SUI	TE B	STREET ADDRESS	1				
TLE D	ACKSONVILLE FL 32216		CITY-ST-ZIP	<u> </u>				ĺ
	UTTON, DONALD H	Delete	TITLE	1			Change	☐ Addition
REET ADDRESS 3	599 UNIVERSITY BLVD., S		NAME STREET ADDRESS				-	
TY-ST-ZIP	ACKSONVILLE FL 32216		CITY-ST-ZIP	1	,			ł
LE D		□ Delete	TITLE	0/0				
ME CI	USICK, PATRICK W		NAME	1 '	. .		Change	☐ Addition
	327 PHILLIPS HWY. ACKSONVILLE FL 32207		STREET ADDRESS	103	78 DEER	MOOD CTA	b RA	
	TOTOOHVILLE FL 3220/		CITY-ST-ZIP	J.Tack	SANNILLE	7 7 7		<i>,</i>

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Genesis Health Development, Inc. Continued April, 2002

The following are additions:

Title: D

Pamela S. Chally, Ph.D., R.N.

12907 Huntley Manor Drive, Jacksonville Beach, FL 32250

Title: D

Zachary R. Fields

4020 Turnberry Ct., Jacksonville, FL 32225

Title: D/VC

Guy Selander, M.D.

1731 University Blvd., So., Jacksonville, FL 32216

Title: D

Gary W. Sneed

116 Carriage Lamp Way, Ponte Vedra Beach, FL 32082

CORPORATE OFFICERS

Title: P

Douglas M. Baer

77 Tallwood Road, Jacksonville Beach, FL 32250

Title: VP

Zachary R. Fields

4020 Turnberry Ct., Jacksonville, FL 32225

Title: VP/S/T

Timothy W. Reinschmidt

3599 University Blvd. Jacksonville Beach, FL 32216