

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001608

FILED
Jan 30, 2004
Secretary of State

Entity Name: OMEGA HEALTHCARE INVESTORS, INC.

Current Principal Place of Business:

9690 DEERECO ROAD, STE. 100
TIMONIUM, MD 21093

New Principal Place of Business:

Current Mailing Address:

9690 DEERECO ROAD, STE. 100
TIMONIUM, MD 21093

New Mailing Address:

FEI Number: 38-3041398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: PICKETT, C. TAYLOR
Address: 9690 DEERECO ROAD, STE. 100
City-St-Zip: TIMONIUM, MD 21093

Title: COOS () Delete
Name: BOOTH, DANIEL J
Address: 9690 DEERECO ROAD, STE. 100
City-St-Zip: TIMONIUM, MD 21093

Title: CFOT () Delete
Name: STEPHENSON, ROBERT O
Address: 9690 DEERECO ROAD, STE. 100
City-St-Zip: TIMONIUM, MD 21093

Title: D () Delete
Name: DECKER, DANIEL A
Address: 9690 DEERECO ROAD, STE. 100
City-St-Zip: TIMONIUM, MD 21093

Title: D () Delete
Name: ERICKSON, THOMAS
Address: 9690 DEERECO ROAD, STE. 100
City-St-Zip: TIMONIUM, MD 21093

Title: D () Delete
Name: FRANKE, THOMAS F
Address: 9690 DEERECO ROAD, STE. 100
City-St-Zip: TIMONIUM, MD 21093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change () Addition
Name: PICKETT, C. TAYLOR
Address: 9690 DEERECO ROAD, STE. 100
City-St-Zip: TIMONIUM, MD 21093

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT O STEPHENSON

CFOT

01/30/2004

Electronic Signature of Signing Officer or Director

_____ Date

STEPHEN D. PLAVIN
9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093

CHRISTOPHER W MAHOWALD DIRECTOR
9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093

DONALD J MCNAMARA DIRECTOR
9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093

EDWARD LOWENTHAL DIRECTOR
9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093

BERNARD J. KORMAN DIRECTOR
9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093

HAROLD J. KLOOSTERMAN DIRECTOR
9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093

R. LEE CRABILL, JR. SR. VP OF OPERATIONS
9690 DEERECO ROAD, SUITE 100
TIMONIUM, MD 21093