

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P95000023246 (8)**

1. Corporation Name

**21ST CENTURY HEALTHCARE FUND, INC.**



Principal Place of Business

Mailing Address

6505 ROCKSIDE ROAD  
SUITE 400  
INDEPENDENCE OH 44131

6505 ROCKSIDE ROAD  
SUITE 400  
INDEPENDENCE OH 44131

3. Date Incorporated or Qualified

03/21/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 476 Foley + Gardner

4. FEI Number

Applied For

Applied For  
 Not Applicable

22 City & State

27 100 North Tampa #2700

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip

Country

28 Tampa FL

Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

33601

30

USA

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TRABER, MARTIN A  
100 NORTH TAMPA STREET  
SUITE 2700  
TAMPA FL 33602

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the principal officer or director (delete if applicable)

(NOTE: Registered Agent signature required when registered)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  DELETE  
NAME TANEJA, JUGAL K  
STREET ADDRESS 6505 ROCKSIDE ROAD, SUITE 400  
CITY-ST-ZIP INDEPENDENCE OH 44131

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME WILLIS, ANTHONY  
STREET ADDRESS 6505 ROCKSIDE ROAD, SUITE 400  
CITY-ST-ZIP INDEPENDENCE OH 44131

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME WITHERINGTON, JAMES P  
STREET ADDRESS 6505 ROCKSIDE ROAD, SUITE 400  
CITY-ST-ZIP INDEPENDENCE OH 44131

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME ROSE, DANIEL  
STREET ADDRESS 6505 ROCKSIDE ROAD, SUITE 400  
CITY-ST-ZIP INDEPENDENCE OH 44131

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME STUPAY, ARTHUR M  
STREET ADDRESS 6505 ROCKSIDE ROAD, SUITE 400  
CITY-ST-ZIP INDEPENDENCE OH 44131

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME CARMICHAEL, SUSAN  
STREET ADDRESS 6505 ROCKSIDE ROAD, SUITE 400  
CITY-ST-ZIP INDEPENDENCE OH 44131

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Printed Name

CR2E034 (3/96)