

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763488

Entity Name: THE GENESIS HEALTH FOUNDATION, INC.

Current Principal Place of Business:

3599 UNIVERSITY BLVD S
JACKSONVILLE, FL 32216

Current Mailing Address:

3599 UNIVERSITY BLVD S
JACKSONVILLE, FL 32216 US

FEI Number: 59-2249340

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRITCHARD, ROBERT H
1301 RIVERPLACE BLVD
SUITE 1500
JACKSONVILLE, FL 32207 US

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

Officer/Director Detail :

Title DCP
Name BAER, DOUGLAS M
Address 3599 UNIVERSITY BLVD. SOUTH
City-State-Zip: JACKSONVILLE FL 32216

Title DV
Name SPIGEL, MICHAEL
Address 8631 SAN SERVERA DRIVE EAST
City-State-Zip: JACKSONVILLE FL 32217

Title D
Name SNEED, GARY W
Address 305 MONTEREY VILLA COURT
City-State-Zip: SAINT AUGUSTINE FL 32095

Title ST
Name DURR, MICHAEL X
Address 3599 UNIVERSITY BOULEVARD
SOUTH
City-State-Zip: JACKSONVILLE FL 32216

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL X. DURR

CFO

04/26/2013

Electronic Signature of Signing Officer/Director Detail

Date