2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763488

Entity Name: THE GENESIS HEALTH FOUNDATION, INC.

Apr 24, 2024 Secretary of State 0989618501CC

FILED

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:

URS AGENTS, LLC 3458 LAKESHORE DRIVE TALLAHASSEE, FL 32312 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 Title DIRECTOR

Name BAER, DOUGLAS M Name SERKIN, HOWARD C

Address 3599 UNVERSITY BLVD. SOUTH Address 3599 UNIVERSITY BLVD S

City-State-Zip: JACKSONVILLE FL 32216 City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR, VP, SECRETARY, Title VP, DIRECTOR TREASURER

REASURER Name ROBERTS, KRIS

Name TABOR, J. BRITTON Address 3599 UNIVERSITY BLVD S

Address 3599 UNIVERSITY BLVD S City-State-Zip: JACKSONVILLE FL 32216

City-State-Zip: JACKSONVILLE FL 32216

Title VP, DIRECTOR Name MANN, ERIC

Name DERIENZO, VICTOR
Address 3599 UNIVERSITY BLVD S

Address 3599 UNIVERSITY BLVD S City-State-Zip: JACKSONVILLE FL 32216
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: DOUGLAS M BAER CHAIRMAN 04/24/2024