2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0400001066

Entity Name: SEMPERCARE HOSPITAL OF FORT MYERS, INC.

FILED
Jan 03, 2014
Secretary of State
CC3118880979

Current Principal Place of Business:

4714 GETTSYBURG ROAD MECHANICSBURG, PA 17055

Current Mailing Address:

4714 GETTSYBURG ROAD LEGAL DEPT MECHANICSBURG, PA 17055

FEI Number: 74-3115716 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 CEO Title P

NameORTENZIO, ROBERT ANameORTENZIO, ROBERT AAddress4714 GETTSYBURG ROADAddress4714 GETTSYBURG ROADCity-State-Zip:MECHANICSBURG PA 17055City-State-Zip:MECHANICSBURG PA 17055

Title VPS Title VPT

NameTARVIN, MICHAEL ENameROMBERGER, SCOTT AAddress4714 GETTSYBURG ROADAddress4714 GETTSYBURG ROADCity-State-Zip:MECHANICSBURG PA 17055City-State-Zip:MECHANICSBURG PA 17055

Title VPAS

Name DUGGAN, JOHN F

Address 4714 GETTSYBURG ROAD

City-State-Zip: MECHANICSBURG PA 17055

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

SIGNATURE: MICHAEL TARVIN

Electronic Signature of Signing Officer/Director Detail

VP 01/03/2014

Date