

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002324

Entity Name: ALICARE, INC.

Current Principal Place of Business:

333 WESTCHESTER AVENUE
ATTN: CLAIRE PIZZUTI
WHITE PLAINS, NY 10604

FILED
Apr 02, 2013
Secretary of State
CC6170981896

Current Mailing Address:

333 WESTCHESTER AVENUE
ATTN: CLAIRE PIZZUTI
WHITE PLAINS, NY 10604

FEI Number: 13-3432221

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 PRES
Name WALSH, DAVID J
Address 333 WESTCHESTER AVENUE
City-State-Zip: WHITE PLAINS NY 10604

Title EVP
Name SCHWARTZ, IRA
Address 333 WESTCHESTER AVENUE
City-State-Zip: WHITE PLAINS NY 10604

Title EVP
Name MALLEN, PAUL
Address 333 WESTCHESTER AVENUE
City-State-Zip: WHITE PLAINS NY 10604

Title VP
Name CHAKRABORTY, NINA
Address 333 WESTCHESTER AVENUE
City-State-Zip: WHITE PLAINS NY 10604

Title EVP
Name KIM, ANN
Address 333 WESTCHESTER AVENUE
ATTN: CLAIRE PIZZUTI
City-State-Zip: WHITE PLAINS NY 10604

Title EVP
Name THORNTON, JOHN
Address 333 WESTCHESTER AVENUE
ATTN: CLAIRE PIZZUTI
City-State-Zip: WHITE PLAINS NY 10604

Title SVP
Name KUREK, ARTHUR
Address 333 WESTCHESTER AVENUE
ATTN: CLAIRE PIZZUTI
City-State-Zip: WHITE PLAINS NY 10604

Title SVP
Name SARTOR, VICTORIA
Address 333 WESTCHESTER AVENUE
ATTN: CLAIRE PIZZUTI
City-State-Zip: WHITE PLAINS NY 10604

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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: ELLEN DUNKIN

SECRETARY

04/02/2013

Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title SECRETARY
Name DUNKIN, ELLEN
Address 333 WESTCHESTER AVENUE
ATTN: CLAIRE PIZZUTI
City-State-Zip: WHITE PLAINS NY 10604