2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

DOCUMENT # 763030

1. Entity Name

GENESIS HEALTH, INC.

Principal Place of Business



FILED Apr 28, 2003 8:00 am Secretary of State

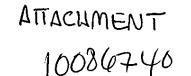
04-28-2003 90155 011 ****61.25

3599 UNIVERSITY BLVD., S., STE B JACKSONVILLE FL 32216			3599 UNIVERSITY BLVD S., STE B JACKSONVILLE FL 32216							•			
• Discission	No. of But		1 - :::										
2. Principal Place of Business			3. Mailing Address								(8)) D(8)((8))		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State			City & State					4. FEI Number 59-2249370 Applied For Not Applicable					
Zip	Zip Country		Zip Co			ountry		5. Certificate of	Status Desired		\$8.75 A	dditional	
6. Name and Address of Current Re				egistered Agent				7. Name and Address of New Registered Agent					
The state of the s						Name		The state of the s					
GEIGER, ALLAN T.				<u>.</u>			Chant Address (D.O. Bar Niverbasia Net Assessment)						
1301 RIVERPLACE BLVD.					Street Address (P.O. Box Number is Not Acceptable)								
SUITE 15													
JACKSONVILLE FL 32207					City				FL	Zip Cod	de		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,											_L amiliar with	and accept	
the obligations of registered agent.													
SIGNATURE													
	orginatore, typed	or printed fiame of registered agent a	and title if appi	icable. (NOTE:	riegistere	- Agent signat	ure required	when reinstating)		DATE			
										01	B		
FILE NOW: FEE IS \$61.25				Election Campaign Fi Trust Fund Contribution				\$5.00 May Be Added to Fees			Payable ment of		
								Added to 1 des	riorida	Depart	inent of	Jiale	
10. OFFICERS AND DIR			CTORS 11.				Α	DDITIONS/CHAN	GES TO OFFICERS	AND DIF	ECTORS I	N 10	
TITLE	DC			☐ Delete	TITLE		D				☐ Change	🔽 Addition	
NAME BROWN, J BROOKS			_		NAMI		_						
STREET ADDRESS 3599 UNIVERSITY BLVD., S., STE						ET ADDRESS	Dus	Busse, David H. 4355 Galileo Avenue, Jax, FL 32					
CITY-ST-ZIP		VILLE FL 32216			CITY	-ST-ZIP	45.	os Galile	eo Avenue	<u>, Ja</u>	x, FL		
TITLE	D SELAMBER	CUVT		Delete	TITLE		D			,	☐ Change	Addition	
NAME STREET ADDRESS	SELANDER				NAME	ET ADDRESS :	Cus	sick, Pat	rick W.			ļ	
CITY-ST-ZIP	TO STATE OF THE			1			10378 Deerwood Club Dr Jacksonville, FL 32256						
	D	VILLE FL		~	-	ST-ZIP	Jac	ksonvill	.e, FL 3	<u>2256</u>		-	
TITLE NAME	WILSON, I	и илитак		🙇 Delete	TITLE		D				☐ Change	🔀 Addition	
STREET ADDRESS	51 CAT RO					: Et address	Joh	nson, Br	uce M.				
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082				CITY-ST-ZIP Ja			w. rors ksonvill	uce M. Syth Stre Se, FL 3	t 2207			
TITLE	DT	DIVI DE IOIT I E OCOOL		☐ Delete	TITLE						Change	Addition	
NAME	BAER, DO	UGLAS M		Delete	NAME		B	resident	and		A Change	Addition	
STREET ADDRESS						T ADDRESS		CTO					
CITY-ST-ZIP		VILLE FL 32216			CITY-	ST-ZIP							
TITLE	D		•	☐ Delete	TITLE		D/S				☐ Change	M Addition	
NAME	CARTER, V				NAME		Pea	rce. M.D	., Herbei	rt T		1	
STREET ADDRESS	7335 THIE				•	T ADDRESS	490	3 River	Basin Dri	ive S	ż.	}	
CITY-ST-ZIP	_	/ILLE FL 32219			CITY-	ST-ZIP	Jac	ksonvill	e, FL 32	<u> 2207</u>			
TITLE	D			☐ Delete	TITLE		D				☐ Change	Addition	
NAME	CHALLY, P				NAME		Sha	d, Meril	yn T.			المعلمد الرع	
STREET ADDRESS		VTLEY MANOR DR.			E	T ADDRESS	811	Point L	a Vista N	1.	لا	المنازع	
CITY-ST-ZIP	JACKSON\	/ILLE FL 32224			CITY-	ST-ZiP	Jac	ksonvil l	e, FL 32	/20/	8	<i>•</i>	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

4-21-03 904-858-7488



DOC#763030

Genesis Health, Inc. Continued April 2003

The following are additions:

Title: D/VC

Gary W. Sneed

116 Carriage Lamp Way, Ponte Vedra Beach, FL 32082

Title: D

Karen Burdette

Burdette B2B, 10151 Deerwood Park Blvd., Bldg. 200, Suite 305

Jacksonville, FL 32256

Title: D

Ernie Brodsky

4268 Via Valencia Circle, Jacksonville, FL 32217

Title: D

Howard Serkin

225 W. Water Street, Suite 1250, Jacksonville, FL 32202

Title: CFO

Timothy W. Reinschmidt

2836 Wood Valley Ct., Jacksonville, FL 32217