2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #851012

1. Entity Name

HEALTH CARE AND RETIREMENT CORPORATION OF AMERICA



Principal Place of Business

333 N. SUMMIT ST.

ATTN: TAXES TOLEDO, OH 43604 US Mailing Address

333 N. SUMMIT ST. ATTN: TAXES

TOLEDO, OH 43604

US

FILED May 19, 2006 8:00 am Secretary of State

05-19-2006 90027 011 ***150.00



03282006

No Chg-P

CR2E034 (11/05)

4. FEI Number 34-4402510

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature: typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Camp Trust Fund Co				\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-SI-ZIP	VSD BIXLER, JEFFREY R 333 N. SUMMIT ST. TOLEDO, OH 43604				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO ORMOND, PAUL 333 N. SUMMIT ST. TOLEDO, OH 43604	-			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HOOPS, KATHRYN 333 N. SUMMIT ST. TOLEDO, OH 43604			DO NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP	VPCO WEIKEL, M. KEITH 333 N. SUMMIT ST. TOLEDO, OH 43604		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPCA MOLER, S.C. 333 N. SUMMIT ST. TOLEDO, OH 43604				
TITLE NAME	EVPC MEYERS, G.G.				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 receiveryor trustee empowered to execute this report as required by Chapter 607, 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

333 N. SUMMIT ST.

TOLEDO, OH 43604

NAME STREET ADORESS

CITY-ST-ZIP

IRE AND TYPED OR PRINTED NAME OF

ALLYA

Heaps 4/20/08 (419) 253-5

ATTACHMENT 40093340

Health Care and Retirement Corporation of America

OFFICERS

Paul A. Ormond M. Keith Weikel Geoffrey G. Meyers

Stephen L. Guillard R. Jeffrey Bixler Steven M. Cavanaugh

Nancy A. Edwards Mark J. Gloth, DO Larry R. Godla Jeffrey A. Grillo Kathryn S. Hoops Matthew S. Kang William H. Kinschner David B. Lanning Barry A. Lazarus Larry C. Lester Spencer C. Moler Susan E. Morey James P. Pagoaga Michael J. Reed

F. Joseph Schmitt Steven D. Spencer

John I. Remenar

Martin D. Allen

Kim Byk Wally Dandy

Veronica Fogelman Patricia Gillette

Jeff Harris

Lynn Hood

Beth Kaczor Annette Orlowski David B. Parker

Clifton J. Porter II Donna Weimer

#851012

Chairman, President & Chief Executive Officer Sr. Exec. Vice President & Chief Operating Officer Executive Vice President, Chief Financial Officer

& Assistant Secretary Executive Vice President

Vice President, General Counsel & Secretary

Vice President, Director of Corporate Development & Assistant Secretary

Vice President, General Manager, Central Division

Vice President, Chief Medical Officer

Vice President, Development and Construction

Vice President, General Manager, Mid-Atlantic Div.

Vice President, Director of Tax & Asst. Treasurer

Vice President, Treasurer

Vice President, Director of Management Support Svs.

Vice President, Development

Vice President, Director of Reimbursement

Vice President, General Manager, Midwest Division Vice President, Controller, & Assistant Secretary

Vice President, General Manager, Eastern Division

Vice President, Rehabilitation Services

Vice President, General Manager, Assisted Living Div.

Vice President, Director of Financial Services & Assistant Treasurer

Vice President, General Manager, West Division

Vice President, Director of Human Resources

& Assistant Secretary

Assistant Vice President, Director of

Internal Audit and Risk Management

Assistant Vice President, Clinical Support Services Assistant Vice President, Assistant General Manager, Southern Division

Assistant Vice President, Director of Sales Mngt.

Assistant Vice President, Director of

Workforce Management

Assistant Vice President, Director of

Business Solutions

Assistant Vice President, Assistant General Manager, Southern Division

Assistant Vice President, HR Operations

Assistant Vice President, Clinical Services

Assistant Vice President, Assistant General Manager,

Central Division

Assistant Vice President, Government Relations Assistant Vice President, Marketing-Operations

ATTACHMENT $\frac{40093340}{851013}$

Health Care and Retirement Corporation of America (continued)

Connie Wenz

Daniel A. Wood

Thomas R. Kile David K. Nees

Assistant Vice President, Clinical Services Assistant Vice President, Assistant General Manager,

Midwest Division

Assistant Treasurer

Associate General Counsel, Assistant Secretary

DIRECTORS

Paul A. Ormond M. Keith Weikel Stephen L. Guillard

ADDRESS FOR ALL ABOVE IS:

333 North Summit Street Toledo, OH 43604

Ph: (419) 252-5500