

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F10000003763

FILED
Oct 13, 2011
Secretary of State

Entity Name: FOX GERIATRIC EDUCATION AND RESEARCH INSTITUTE, INC.

Current Principal Place of Business:

7 CARNEGIE BLVD.
CHERRY HILL, NJ 08002

New Principal Place of Business:

7 CARNEGIE PLAZA
CHERRY HILL, NJ 08003

Current Mailing Address:

7 CARNEGIE BLVD.
CHERRY HILL, NJ 08002

New Mailing Address:

7 CARNEGIE PLAZA
CHERRY HILL, NJ 08003

FEI Number: 26-1102244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: ANN J WILLIAMS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT
Name: FOX, TIMOTHY
Address: 1354 HAINESPORT RD.
City-St-Zip: MT. LAUREL, NJ 08054

Title: T
Name: DUUS, RICHARD A
Address: 132 PEARLCROFT RD.
City-St-Zip: CHERRY HILLS, NJ 08034

Title: ST
Name: BESSER, MARCUS
Address: 11 MARYLAND AVE.
City-St-Zip: HAVERTOWN, PA 19083

Title: ED
Name: JACOBS, MICHELLE
Address: 5 BIRCHWOOD DR.
City-St-Zip: MEDFORD, NJ 08055

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: MICHELLE JACOBS

ED

10/13/2011

Electronic Signature of Signing Officer or Director

Date