

F50630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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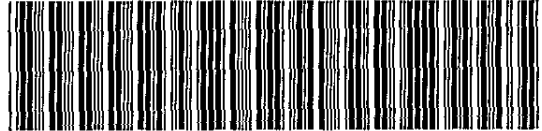
(Business Entity Name)

(Document Number)

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DIVISION OF REGISTRATION

C. Goulette MAY 21 2003



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 091913 4983A

AUTHORIZATION

Patricia Pyant

COST LIMIT : \$ 35.00

ORDER DATE : May 13, 2003

ORDER TIME : 8:40 AM

ORDER NO. : 091913-175

CUSTOMER NO: 4983A

CUSTOMER: Marilyn Adelman
Cozen O'Connor, P.C.
1900 Market Street
The Atrium
Philadelphia, PA 19103

CHANGE OF AGENT

NAME: GRAMERCY PARK NURSING CENTER,
INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 1140

EXAMINER: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GRAMERCY PARK NURSING CENTER, INC.

2. The principal office address: 1114 Wynwood Avenue, Cherry Hill, NJ 08002-3294

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/15/1981 Document number: F50630

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Leonard Oshinsky

1150 East Hallandale Beach Blvd., Suite A

Hallandale, FL 33009

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Maureen Cullen
(Signature of an officer, chairman or vice chairman of the board)

Maureen Cullen, Attorney-in-Fact
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Dorothy Tenshaw
(Signature of Registered Agent)

May 5, 2003
(Date)

Corporation Service Company

If signing on behalf of an entity:

Dorothy Tenshaw

(Typed or Printed Name)

Assistant Vice President

(Capacity)

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314