

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
BUREAU OF CORPORATIONS

1996-17-96

B-3734

DOCUMENT # F93000000685 (8)

1. Corporation Name

NATIONWIDE CARE, INC.



Principal Place of Business

9200 KEYSTONE CROSSING, SUITE 800  
INDIANAPOLIS IN 46240

Mailing Address

9200 KEYSTONE CROSSING, SUITE 800  
INDIANAPOLIS IN 46240

2. Principal Place of Business

21 Suite, Apt., Etc.

22 City & State

23 Zip Country

24 9. Name and Address of Current Registered Agent

2a. Mailing Address

26 Suite, Apt., Etc.

27 City & State

28 Zip Country

29 30

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

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0202 and 607.1503, Florida Statutes, the above named corporation solemnly this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0205, Florida Statutes.

SIGNATURE

Signature of person authorized to sign this report

Signature of person authorized to sign this report

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

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STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY, ST, ZIP

Pres. CEO

W. Bruce Lunsford

3300 Providian Center, 400 W. Market St.  
Louisville, KY 40202

V.C.F.O.

W. Earl Reed III

3300 Providian Center, 400 W. Market St.  
Louisville, KY 40202

Sec.

Jill L. Force

3300 Providian Center, 400 W. Market St.  
Louisville, KY 40202

Treas.

Richard A. Lechleiter

3300 Providian Center, 400 W. Market St.  
Louisville, KY 40202

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

**VENCOR, INC. DIRECTORS**

**W. Bruce Lunsford**  
**Chairman**  
**3300 Providian Center**  
**Louisville, KY 40202**

**R. Gene Smith**  
**Vice Chairman**  
**3300 Providian Center**  
**Louisville, KY 40202**

**William C. Ballard Jr.**  
**Counsel - Greenbaum Doll & McDonald**  
**3300 Providian Center**  
**Louisville, KY 40202**

**Michael R. Barr**  
**3300 Providian Center**  
**Louisville, KY 40202**

**Donna R. Ecton**  
**Business Consultant**  
**3300 Providian Center**  
**Louisville, KY 40202**

**Greg D. Hudson**  
**President Hudson Chevrolet**  
**3300 Providian Center**  
**Louisville, KY 40202**

**William H. Lomicka**  
**President Mayfair Capital, Inc.**  
**3300 Providian Center**  
**Louisville, KY 40202**

**W. Earl Reed III**  
**3300 Providian Center**  
**Louisville, KY 40202**