PROFIT CORPORATION ANNUAL REPORT

1999



Mailing Address

125 EUGENE O'NEILL DR

NEW LONDON CT 06320

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9400004280

1. Corporation Name

Principal Place of Business

125 EUGENE O'NEILL DR

MARINER HEALTH CARE OF PORT ORANGE, INC.

NEW LONDON CT 06320		NEW LONDON CT 06320 US				DO NOT WRITE IN THIS SPACE					
US		03			3. Date Incorp 08/17/19	- •	ifed	<u></u>			
2. Principal Pla	2a. Mailing Address	g Address			4. FEI Number			App	lied For		
21 One R	avinia Drive	26 One Ravinia Drive			59-32606	82				Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate o	f Status Desire	d . 🗆		3.75 Ac		
22 Suite 1500		27 Suite 1500			5. 5556.5				Fee Réq		
City & State		City & State		6. Election Ca		ing 🗆		5.00 A			
	ta, GA	28 Atlanta, GA				Contribution			Added to	Fees	
Zip 30346		Zip Country USA			8. This corporation owes the current year Intangible Personal Property Tax. Yes No 10. Name and Address of New Registered Agent						
	9. Name and Address of Current	Registered Agent			10. Name and	Address of No	w Registe	rea Agen	τ		
СТС	CODDODATION SYSTEM		81	Name							
C T CORPORATION SYSTEM			82	Street /	Address (P.O. Box Nur	nber is Not Acc	eptable)				
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			-		···						
PLAN	TATION FL 33324		83								
			84	City	4-10			85	Zip Ci	ode	
		LOOT 1500 Floride Statutes	the observe	namad	corporation submite thi	e statement for		_	ging its o	egistered	
office or re	o the provisions of Sections 607.0502 gistered agent, or both, in the State on n familiar with, and accept the obligati	it Florida. Such change was autho	orizea by	me corpo	pration's board of direct	ors. I hereby a	ccept the ap	opointme	nt as reg	istered	
SIGNATURE		NOTE: B			equired when reinstating)		DATE	-			
	Signature, typed or printed name of registered agent OFFICERS ANI		13.	t signature re		CHANGES TO			RECTOR	RS IN 12	
12.	PD OF FIGURE AND	□ DELETE	1.1 TITLE		P				Change	Addition	
NAME	STRATTON JR. ARTHUR W	_	1.2 NAME								
STREET ADDRESS	1881 WORCESTER RD		1.3 STREET	ADDRESS	One Ravinia	Drive,	Suite	1500			
CITY-ST-ZIP	FRAMINGHAM MA 01701		1.4 CITY-S1		Atlanta, GA	30346					
TITLE	S	X DELETE	2.1 TITLE		VS			<u> </u>	Change	X Addition	
NAME	GILLIGAN, ALISON K.		2.2 NAME		Miele, Stef	ano M.					
STREET ADDRESS	125 EUGENE O'NEILL DR		2.3 STREET	ADDRESS	One Ravinia	Drive,	Suite	1500			
CITY-ST-ZIP	NEW LONDON CT 06320		2. 4 CITY-S	T-ZIP	Atlanta, GA	30346					
TITLE	SD	X DELETE	3.1 TITLE		D				Change	X Addition	
NAME	STRATTON, NANCY L		3.2 NAME		Whittle, Su	san Thom	nas				
STREET ADDRESS	125 EUGENE O'NEILL DR		3.3 STREET	ADDRESS	One Ravinia	Drive,	Suite	1500			
CITY-ST-ZIP	NEW LONDON CT		3.4, CITY-S	T-ZIP	Atlanta, GA						
TITLE	TD	∑ DELETE	4.1 TITLE		VT				Change	X Addition	
NAME	HANSEN, DAVID N		4.2 NAME		Gentry, Boy						
STREET ADDRESS	1881 WORCESTER RD		4.3 STREET	ADDRESS	One Ravinia	Drive,.	Suite	1500			
CITY-ST-ZIP	FRAMINGHAM MA 01701		4.4 CITY-ST	r-ZIP	Atlanta, GA	30346					
TITLE	AS	₩ DELETE	5.1 TITLE	ı	AS				Change	X Addition	
NAME	BURNETT, MARK H		5.2 NAME		Finkel, Jan						
STREET ADDRESS	53 STATE STREET 17TH FL		53 STREET		One Ravinia		Suite	1500			
CITY-ST-ZIP	BOSTON MA		5.4 CITY-S	T-ZIP	Atlanta, GA	30346			Ob ====	A Julia	
TITLE		☐ DELETÉ	6.1 TITLE					□.	Change	☐ Addition	
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET								
CITY-ST-ZIP			6.4 CITY-S	T-ZIP							

14. 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 annual report or supplemental annual 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 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

1/22/99

678.443.7000

FILED

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90017 017 ***150.00