2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 26, 2004 8:00 am Secretary of State 01-26-2004 90057 041 ***150.00

678-443-7000 Daytime Phone #

1. Entity Name MARINER HEALTH CARE OF PALM CITY, INC.							01 20 2 00 1	70007 0 11		<i></i>	
Principal Place of Business 1 RAVINIA DR SUITE 1500 ATLANTA, GA 30346 US 2. Principal Place of Business			Mailing Address 1 RAVINIA DR SUITE 1500 ATLANTA, GA 30346 US 3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01062004	Chg-P	CR2E034	(10/03)		
City & State			City & State			4. FEI Numbe			· ·	plied For Applicable	
Zip	Country		Zip	Country			of Status Desired	Fee	.75 Addi Required		
	6. Name a	nd Address of Current F	Registered Agent	gistered Agent Name			7. Name and Address of New Registered Agent				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324					Street Address (P.O. Box Number is Not Acceptable)						
	٠				City			FL	Zip Code	,	
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, typed or	printed name of registered agent a	and title if applicable. (NC	TE: Registere	ad Agent signature require	id when reinstating)	·	DATE			
		FEE IS \$150.00 Fee will be \$550.0	9. Election Camp Trust Fund Cor		ncing \$5	6.00 May Be ded to Fees					
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	ICERS AND DI	RECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	ARREL NIA DR STE 1500 GA 30346	Delete Delete] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MIELE, ST ONE RAVII ATLANTA,	NIA DR STE 1500	☐ Delete		i] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT GENTRY, I ONE RAVII ATLANTA,	NIA DR STE 1500	□ Delete		I] Change	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	D MANGINE ONE RAVI ATLANTA,	NIA DR STE1500	Delete] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1	MICHAEL NIA DR STE 1500 FL 30346	☐ Delete] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NN G NIA DR STE 1500 FL 30346	☐ Delete		I			[☐ Change	Addition	
indicated of the co	d on this report rporation or th	t or supplemental report is e receiver or trustee empe	n this filing does not qualify is true and accurate and tha owered to execute this repo with all other like empowers	t my sign. ort as requ	ature shall have the	e same legal effe	ct as if made under	oath: that I am	an officer	or director	

Wynn G. Sims

My A . SUM SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Affachment

Directors, Officers Report

Mariner Health Care of Palm City, Inc.

F94000004281

Friday, January 09, 2004

DIRECTORS

Steven S. Heinrichs

Director

Home Address: None given

Michael Turner

Director

Home Address: 2607 S. Woodland Blvd.

#149

Deland, FL 32720

Darrell D. Zurovec

Director

Home Address: 1900 Mistywood Drive

Austin, TX 78746

OFFICERS

Stefano M. Miele

Secretary

Home Address:

325 Hunting View Court

Atlanta, GA 30328

Boyd P. Gentry

Vice President and Treasurer

Home Address:

48 Northwood Avenue Atlanta, GA 30309

William C. Straub

Vice President and Assistant Treasurer

Home Address:

24523 Bay Hill Blvd. Katy, TX 77494 USA

Darrell D. Zurovec

Vice President and Assistant Secretary

Home Address:

1900 Mistywood Drive Austin, TX 78746

Wynn G. Sims

Assistant Secretary

Home Address:

629 Carriage Drive

Atlanta, GA 30328 USA