

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90320 002 ***150.00

DOCUMENT # F96000003628

1. Entity Name
GENESIS ELDERCARE PROPERTIES, INC.



Principal Place of Business
**101 E. STATE STREET
KENNETT SQUARE, PA 19348 US**

Mailing Address
**101 E. STATE STREET
KENNETT SQUARE, PA 19348 US**

14000549



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

04112005 Chg-P CR2E034 (10/03)

4. FEI Number
23-2854177

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO HAGER, JR., GEORGE V CEO 101 E. STATE STREET KENNETT SQUARE, PA 19348 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO MCKEON, JAMES V CFO 101 E. STATE STREET KENNETT SQUARE, PA 19348 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHUEFTAN, NORMAN VP 101 E. STATE STREET KENNETT SQUARE, PA 19348 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COGGINS, EILEEN S 101 E. STATE STREET KENNETT SQUARE, PA 19348 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAUSWALD, BARBARA J T <input checked="" type="checkbox"/> Delete 101 EAST STATE STREET KENNETT SQUARE, PA 19348
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN / CEO GEORGE V. HAGER, JR. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR / CFO JAMES V. MCKEON <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NORMAN SCHUEFTAN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR / SECY EILEEN M. COGGINS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHIEF ACCOUNTING OFFICER THOMAS DIVITTANO 101 EAST STATE STREET KENNETT SQUARE, PA 19348 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Norman Schueftan* **VP - NORMAN SCHUEFTAN** **4-18-05** **(610) 444-6350**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

14000549

GENESIS HEALTHCARE CORPORATION
(Genesis Eldercare Properties, Inc. - Document: # F96000003628)
OFFICERS and DIRECTORS
10-01-2004 - 09-30-2005

OFFICERS:

George V. Hager, Jr.
Business Address

Chief Executive Officer
101 East State Street
Kennett Square, PA 19348

James V. McKeon
Business Address

Chief Financial Officer
101 East State Street
Kennett Square, PA 19348

David Almquist
Business Address

President
515 Fairmount Avenue
Towson, MD 21286

Norman Schueftan
Business Address

Vice President
101 East State Street
Kennett Square, PA 19348

Eileen M. Coggins
Business Address

Secretary
101 East State Street
Kennett Square, PA 19348

Thomas DiVittorio
Business Address

Chief Accounting Officer
101 East State Street
Kennett Square, PA 19348

DIRECTORS:

George V. Hager, Jr.
Business Address

Chairman of the Board
101 East State Street
Kennett Square, PA 19348

James V. McKeon
Business Address

Director
101 East State Street
Kennett Square, PA 19348

Eileen M. Coggins
Business Address

Director
101 East State Street
Kennett Square, PA 19348