## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Feb 23, 2004 8:00 am Secretary of State 02-23-2004 90039 012 \*\*\*150.00 DOCUMENT # F96000006547 ERC LONG TERM CARE SOLUTIONS, INC. Principal Place of Business Mailing Address 54009689 20 SECURITY DRIVE 20 SECURITY DRIVE AVON, CT 06001 AVON, CT 06001 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 02102004 Chg-P Applied For City & State City & State 4. FEI Number 06-1460792 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 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: Begistered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. PDC PD XI Change Addition TITLE Defete TITLE VON MOLTKE, NICHOLAS NAME MAME von Moltke, Nicholas STREET ADDRESS 20 SECURITY DRIVE STREET ADDRESS 20 Security Drive Avon, CT 06001 CITY-ST-ZIP AVON, CT 06001 CITY-ST-ZIP Avon, CT ۷P Change Addition TITLE Delete TITLE NAME CATHCART, DANIEL NAME STREET ADDRESS 20 SECURITY DRIVE STREET ADDRESS CITY - ST - 7IP AVON, CT 06001 CITY-ST-ZIP Addition TITLE Delete Change TITLE NAME BAVELAS, DAVID STREET ADDRESS 20 SECURITY DRIVE STREET ADDRESS AVON\*CT-06001\* CITY-ST-ZIP CHY-SI-ZIP Change ☐ Addition TITLE Delete BARRY, RICHARD NAME NAME STREET ADDRESS 20 SECURITY DRIVE STREET ADDRESS CITY-ST-ZiP AVON, CT 06001 CITY-ST-ZIP X Addition Change Delete Stanley, Alfred TILLER, JOHN NAME NAME 5200 Metcalf Ave. 5200 METCALF AVE.. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OVERLAND PARK, KS 66202 CITY-ST-ZIP Overland Park, KS 66202 X Addition D ☐ Change TITLE Delete TITLE ATTEY, JOHN NAME NAME Barnett, Michael 5200 METCALF AVE. STREET ADDRESS STREET ADDRESS 251 N. Illinois Street CITY-ST-ZIP OVERLAND, KS 62202 CITY-ST-ZIP Indianapolis, IN 46204 12. I hereby certify that the information supplied with this filling 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 addyss. With all other like empowered.

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