2000 UNIFORM BUSINESS REPORT (UBR) FILED May 24, 2000 8:00 am DOCUMENT # F96000006696 1. Entity Name Secretary of State DUBLIN/SCC. INC. 05-24-2000 90039 014 ***150.00 Mailing Address Principal Place of Business 10065 RED RUN BLVD RED RUN BLVD OWINGS MILLS MD 21117-4827 € MILLS MD 21117 C0097416 US 910 RIDGEBROOK ROAD 910 RIDGEBROOK ROAD Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City SPARKS, MD 21152 4. FEI Number CITSPARKS, MD 21152 58-2114436 Not Applicable Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Juite 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 John Morrissey, Asst. Vice President (NOTE: Registered Agent signature required when reinstating) SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE TITLE INTEGRATED HEALTH SERVICES, INC. PICKETT, TAYLOR NAME NAME 910 RIDGEBROOK RD. STREET ADDRESS STREET ADDRESS 10065 RED RUN BLVD SPARKS, MD 21152 CITY-ST-ZIP CITY-ST-7IP **OWINGS MILLS MD 21117** ☐ Addition TITLE Delete INTEGRATED HEALTH SERVICES, INC. STEPHENSON, ROBERT NAME NAME 910 RIDGEBROOK RD. STREET ADDRESS STREET ADDRESS 10065 RED RUN BLVD SPARKS, MD .21152 CITY-ST-7IP CITY-ST-ZIP **OWINGS MILLS MD 21117** Change Addition TITLE TITLE Delete INTEGRATED HEALTH SERVICES, INC. FULCHINO, MARK NAME NAME 910 RIDGEBROOK RD. STREET ADDRESS STREET ADDRESS 10065 RED RUN BLVD SPARKS, MD 21152 CITY-ST-ZIP CITY-ST-ZIP OWINGS MILLS MD 21117 (Change Addition SD ☐ Delete TITLE INTEGRATED HEALTH SERVICES, INC. NAME LEVIN, MARC NAME 910 RIDGEBROOK RD. STREET ADDRESS STREET ADDRESS 10065 RED RUN BLVD SPARKS, MD 21152 CITY-ST-ZIP CITY-ST-ZIP OWINGS MILLS MD 21117 ☐ Addition Change ☐ Delete TITLE INTEGRATED HEALTH SERVICES, INC. **ELKINS, MARSHALL** NAME NAME 910 RIDGEBROOK RD. STREET ADDRESS STREET ADDRESS 10065 RED RUN BLVD SPARKS, MD 21152 CITY-ST-ZIP CITY-ST-7IP OWINGS MILLS MD 21117 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF

13. 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 true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phon