

## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006951

Entity Name: SOUTHCARE NURSING CENTER, INC.

FILED  
Jan 16, 2004  
Secretary of State

### Current Principal Place of Business:

IN TOWN RETIREMENT CLUB  
P.O. BOX 967  
GLENSIDE, PA 19038

### New Principal Place of Business:

SOUTHCARE INC.  
P.O. BOX 967  
GLENSIDE, PA 19038

### Current Mailing Address:

IN TOWN RETIREMENT CLUB  
P.O. BOX 967  
GLENSIDE, PA 19038

### New Mailing Address:

SOUTHCARE INC  
P.O. BOX 967  
GLENSIDE, PA 19038

FEI Number: 23-2047624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

### Name and Address of Current Registered Agent:

BINGHAM, MARVIN W JR.  
14811 NW 140TH ST.  
ALACHUA, FL 32616 US

### Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

### OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DOBSON, DAVID  
Address: 7425 OLD YORK RD  
City-St-Zip: MELROSE PARK, PA 19027

Title: ST ( ) Delete  
Name: DOBSON, ETHEL  
Address: 7425 OLD YORK RD  
City-St-Zip: MELROSE PARK, PA 19027

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID DOBSON

P

01/16/2004

Electronic Signature of Signing Officer or Director

Date