

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 22, 1999 8:00 am  
Secretary of State

03-22-1999 90058 001 \*\*\*150.00

DOCUMENT # F98000005753

1. Corporation Name  
COLEWOOD CORPORATION

Principal Place of Business  
11555 DARNESTOWN ROAD  
GAITHERSBURG MD 20878-3200

Mailing Address  
11555 DARNESTOWN ROAD  
GAITHERSBURG MD 20878-3200

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/24/1998

4. FEI Number

52-0985621

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 333 NORTH Summit

Suite, Apt. #, etc.

22 TAX Dept

City & State

23 TOLEDO OH

Zip Country

24 43699-0086 25

2a. Mailing Address

26 333 NORTH Summit

Suite, Apt. #, etc.

27 TAX Dept

City & State

28 TOLEDO OH

Zip Country

29 43699-0086 30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE  
NAME REMPE, JAMES H  
STREET ADDRESS 1155 DARNESTOWN RD  
CITY-ST-ZIP GAITHERSBURG MD

TITLE S ☒ DELETE  
NAME KEMEZYS, K P  
STREET ADDRESS 1155 DARNESTOWN RD  
CITY-ST-ZIP GAITHERSBURG MD

TITLE V ☒ DELETE  
NAME BUCKLEY, JOSEPH R  
STREET ADDRESS 1155 DARNESTOWN RD  
CITY-ST-ZIP GAITHERSBURG MD

TITLE VT ☒ DELETE  
NAME COMAS, LEIGH C  
STREET ADDRESS 1155 DARNESTOWN RD  
CITY-ST-ZIP GAITHERSBURG MD

TITLE AS ☒ DELETE  
NAME BUTENAS, JOHN P  
STREET ADDRESS 1155 DARNESTOWN RD  
CITY-ST-ZIP GAITHERSBURG MD

TITLE V ☒ DELETE  
NAME CAREY, RICHARD N  
STREET ADDRESS 1155 DARNESTOWN RD  
CITY-ST-ZIP GAITHERSBURG MD

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME PAUL A ORMOND  
1.3 STREET ADDRESS 333 NORTH Summit  
1.4 CITY-ST-ZIP TOLEDO, OH 43699-0086

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME M. Keith Weikel  
2.3 STREET ADDRESS 333 NORTH Summit  
2.4 CITY-ST-ZIP TOLEDO OH 43699-0086

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME SEE ATTACHED LIST  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/99

Date

419-252-5885

Daytime Phone #

CR2E034 (11/98)

247724-90058-1  
F9800000 5753

**ManorCare Health Services, Inc.  
and most wholly owned subsidiaries**

**Directors:**

Paul A. Ormond  
M. Keith Weikel  
Geoffrey G. Meyers

**Officers:**

|                        |  |
|------------------------|--|
| Paul A. Ormond         | Chairman, President & Chief Executive Officer                              |
| M. Keith Weikel        | Senior Executive Vice President & Chief Operating Officer                  |
| Geoffrey G. Meyers     | Executive Vice President, Chief Financial Officer &<br>Assistant Secretary |
| R. Jeffrey Bixler      | Vice President, General Counsel & Secretary                                |
| Spencer C. Moler       | Vice President & Assistant Secretary                                       |
| John P. McKenna        | Senior Vice President, ALF Start-Up  |
| Wolfgang von Maack     | Senior Vice President, Healthcare Services                                 |
| James H. Rempe         | Senior Vice President  |
| K. Peter Kemezys       | Vice President, Associate General Counsel & Assistant Secretary            |
| Leo H. Phillips, Jr.   | Vice President, Associate General Counsel & Assistant Secretary            |
| Judy Dabertin          | Vice President, General Mgr., Chicago/West District                        |
| Larry R. Godla         | Vice President, Construction   |
| David C. Heberling     | Vice President, Employee Relations   |
| Debra Howe             | Vice President, General Manager, Mid-Atlantic District                     |
| Robert A. Johnson      | Vice President, Reimbursement  |
| James Pagoaga          | Vice President, Rehabilitation Services                                    |
| Richard Parades        | Vice President, General Manager, Mid-States District                       |
| Marcia Reihart         | Vice President, General Manager, Eastern District                          |
| Nancy A. Edwards       | Vice President, General Manager, Central Division                          |
| Jeffrey W. Ferguson    | Vice President, General Manager, Midwest Division                          |
| F. Joseph Schmitt      | Vice President, General Manager, Southern Division                         |
| Margarita Schoendorfer | Vice President, Controller   |
| John P. Butenas        | Assistant General Counsel & Assistant Secretary                            |
| Douglas Haag           | Treasurer  |
| Peter L. Childs        | Assistant Treasurer  |
| David L. Gehrich       | Assistant Treasurer  |

Address for the above is as follows:

HCR Manor Care  
333 North Summit  
Toledo, OH 43699-0086