FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION *ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 28 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G21570 (8)

1. Corporation Name
GULF COAST HOME HEALTH SERVICES OF FLORIDA, INC.

Principal Place of Business	Mailing Address
ONE MERRICK AVE. WESTBURY NY 11590	10890 BENSON DR. OVERLAND PARK KS 66210

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/03/1983
3a. Date of Last Report: 05/03/1994

2. Principal Place of Business
21: 175 Broads Hollow Rd
22: Suite, Apt. #, etc.
23: City & State: Melville, NY
24: Zip: 11747
25: Country: US

2a. Mailing Address
26:
27: Suite, Apt. #, etc.
28: City & State
29: Zip
30: Country

4. FEI Number: 59-2254375 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☒ Change ☐ Addition
NAME	FUSCO, ROBERT A.	1.2 NAME	
STREET ADDRESS	ONE MERRICK AVE.	1.3 STREET ADDRESS	SEE ATTACHED
CITY-ST-ZIP	WESTBURY NY 11590	1.4 CITY-ST-ZIP	
TITLE	VS	2.1 TITLE	☐ Change ☐ Addition
NAME	LADEROUT, LAURIN L. JR.	2.2 NAME	
STREET ADDRESS	ONE MERRICK AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	WESTBURY NY 11590	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	☐ Change ☐ Addition
NAME	BOELSEN, THOMAS M.	3.2 NAME	
STREET ADDRESS	ONE MERRICK AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WESTBURY NY 11590	3.4 CITY-ST-ZIP	
TITLE	AS	4.1 TITLE	☐ Change ☐ Addition
NAME	HART, BRADLEY D	4.2 NAME	
STREET ADDRESS	10890 BENSON DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK FL 66210-1508	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	LUMPKIN, STEVE	5.2 NAME	
STREET ADDRESS	10890 BENSON DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66210-1508	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	OLSTEN, CHERYL	6.2 NAME	
STREET ADDRESS	ONE MERRICK AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	WESTBURY NY 11590	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Laurin L Laderout 4/25/95 576-844-7135
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
LAURIN L. LADEROUT, JR. VICE PRES

0398477 CP

BOARD OF DIRECTORS

Director	Thomas M. Boelsen	175 Broad Hollow Road Melville, NY 11747
Director	Robert A. Fusco	175 Broad Hollow Road Melville, NY 11747

CORPORATE OFFICERS

President	Robert A. Fusco	175 Broad Hollow Road Melville, NY 11747
Senior Vice President and Chief Financial Officer	Thomas M. Boelsen	175 Broad Hollow Road Melville, NY 11747
Senior Vice President and General Counsel	William P. Costantini	175 Broad Hollow Road Melville, NY 11747
Vice President, Finance/Accounting and Treasurer	Steve Jordan	10890 Benson Drive Overland Park, KS 66210
Vice President, Ass't General Counsel and Secretary	Laurin L. Laderoute, Jr.	175 Broad Hollow Road Melville, NY 11747
Vice President, Ass't General Counsel and Assisant Secretary	Nancy F. Lanis	175 Broad Hollow Road Melville, NY 11747
Assistant Secretary	Ruth Dixon	10890 Benson Drive Overland Park, KS 66210
Assistant Secretary	Bradley E. Hart	10890 Benson Drive Overland Park, KS 66210