File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris **ANNUAL REPORT** Secretary of State 1999 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # M96000000185** 1a. Principal Place of Business Address GENESIS VIATICAL, L.L.C. 269 W. MAIN 269 W. MAIN LEXINGTON KY 40507 LEXINGTON KY 40507 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 05/28/1996 GA Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 58-2197059 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Ζιρ Country Zιρ Country \$8.75 Additional Fee Required 02/26/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 Suite, Apt #, etc Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE DATE (Registered Agent Accepting Appointment): (NOTE: Registered Agent signature required when rematating): 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR 2005 ST. STEPHENS GREEN KELLER, STEVEN LEXINGTON KY **80|0002794818**---3 -03/04/99--01076--023 ****188.75 ****188.75 11. I do 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 annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an

Stephen L. Keller

SIGNATURE AND TYPED ORDER NEONAME OF SIGNIFIC MANAGING MEMBLE CHIMANALICH.

2/22/99 (606)225-1015

INHSE10 R (12-98)

SIGNATURE: