2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2012
Secretary of State

DOCUMENT# N44499

Entity Name: HEALTHPARK CARE CENTER, INC.

Current Principal Place of Business:

16131 ROSERUSH COURT
FT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

2776 CLEVELAND AVENUE
LEGAL MOC 459
FT MYERS, FL 33901

New Mailing Address:

FEI Number: 65-0319983 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCGILLICUDDY, MARY A
C/O LEE MEMORIAL HOSPITAL
2776 CLEVELAND AVE
FORT MYERS, FL 33902 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: S
Name: NANCY, MCGOVERN
Address: 785 ENTRADA DRIVE
City-St-Zip: FT MYERS, FL 33919

Title: C
Name: AKIN, RICHARD B
Address: 1220 WESTFIELD DR
City-St-Zip: FORT MYERS, FL 33919

Title: T
Name: MARILYN, STOUT
Address: 2907 SW 29TH AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: VC
Name: STEPHEN, BROWN R MD
Address: P O BOX 1276
City-St-Zip: SANIBEL, FL 33957

I hereby 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 all other like empowered.

SIGNATURE: MARY A. MCGILLICUDDY MS. 02/17/2012

Electronic Signature of Signing Officer or Director — Date