

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **701000053777**

1. Entity Name

OHI Sunshine, Inc.

FILED

02 AUG 20 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

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****558.75 ****558.75

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
9690 Deereco Road

3. Mailing Address
9690 Deereco Road

Suite, Apt. #, etc.
100

Suite, Apt. #, etc.
100

City & State
Timonium, Maryland

City & State
Timonium, Maryland

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip
21093

Country
USA

Zip
21093

Country
USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City
Tallahassee

FL Zip Code
32301

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
President/CEO
C. Taylor Pickett
9690 Deereco Road, Suite 100
Timonium, Maryland 21093

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
CFO/Treasurer/Director
Robert O. Stephenson
9690 Deereco Road, Suite 100
Timonium, Maryland 21093

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Daniel J. Booth
COO/Secretary
9690 Deereco Road, Suite 100
Timonium, Maryland 21093

TITLE
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CITY- ST- ZIP

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IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/14/02

Date

410/427-1700

Daytime Phone #