

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08190

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** NATIONWIDE HEALTH PROPERTIES, INC.

**Current Principal Place of Business:**

610 NEWPORT CENTER DRIVE  
SUITE 1150  
NEWPORT BEACH, CA 92660 US

**New Principal Place of Business:**

**Current Mailing Address:**

610 NEWPORT CENTER DRIVE  
SUITE 1150  
NEWPORT BEACH, CA 92660 US

**New Mailing Address:**

**FEI Number:** 95-3997619

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: D  
Name: PASQUALE, DOUGLAS M  
Address: 610 NEWPORT CENTER DRIVE, SUITE 1150  
City-St-Zip: NEWPORT BEACH, CA 92660

Title: V  
Name: KHOURY, ABDO H  
Address: 610 NEWPORT CENTER DRIVE, SUITE 1150  
City-St-Zip: NEWPORT BEACH, CA 92660

Title: S  
Name: PEARSON, DON M  
Address: 26571 NORMANDALE DRIVE #22M  
City-St-Zip: LAKE FOREST, CA 92630

Title: V  
Name: BRADLEY, DONALD D  
Address: 610 NEWPORT CENTER DRIVE, SUITE 1150  
City-St-Zip: NEWPORT CENTER, CA 92660

Title: V  
Name: CHAPPELL, BRENT P  
Address: 610 NEWPORT CENTER DRIVE, SUITE 1150  
City-St-Zip: NEWPORT BEACH, CA 92660

Title: V  
Name: LATY, ROGER E  
Address: 610 NEWPORT CENTER DRIVE, SUITE 1150  
City-St-Zip: NEWPORT BEACH, CA 92660

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROGER E. LATY

VP

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date