2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

DOCUMENT# P25350

Entity Name: NATIONWIDE HEALTH PROPERTIES FINANCE CORPORATION

Current Principal Place of Business:

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

New Principal Place of Business:

10350 ORMSBY PARK PLACE
SUITE 300
LOUISVILLE, KY 40223 US

Current Mailing Address:

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

New Mailing Address:

10350 ORMSBY PARK PLACE
SUITE 300
LOUISVILLE, KY 40223 US

FEI Number: 95-4227707 **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: RINEY, T R
Address: 10350 ORMSBY PARK PLACE, STE 300
City-St-Zip: LOUISVILLE, KY 40223

Title: D
Name: SCHWEINHART, RICHARD A
Address: 10350 ORMSBY PARK PLACE, SUITE 300
City-St-Zip: LOUISVILLE, KY 40223

Title: D
Name: WOOD, BRIAN K
Address: 10350 ORMSBY PARK PLACE, SUITE 300
City-St-Zip: LOUISVILLE, KY 40223

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: BRIAN K. WOOD D 04/27/2012

Electronic Signature of Signing Officer or Director Date