2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P27388

FILED May 01, 2006 Secretary of State

Entity Name: ORCHARD RIDGE NURSING CENTER CORP.

Current Principal Place of Business: New Principal Place of Business:

ONE BEACON STREET SUITE 1100 BOSTON, MA 02108

Current Mailing Address: New Mailing Address:

ONE BEACON STREET SUITE 1100 BOSTON, MA 02108

FEI Number: 04-3072231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DP (X) Change () Addition Name: GUILLARD, STEPHEN L., Name: DELL'ANNO, DAMIAN

Address: ONE BEACON STREET, SUITE 1100 Address: ONE BEACON STREET, SUITE 1100

City-St-Zip: BOSTON, MA 02108 City-St-Zip: BOSTON, MA 02108

Name: DELL'ANNO, DAMIAN Name: STEPHAN, WILLIAM

Address: ONE BEACON STREET, SUITE 1100 Address: ONE BEACON STREET, SUITE 1100

City-St-Zip: BOSTON, MA 02108 City-St-Zip: BOSTON, MA 02108

Title: AY () Delete Title: AT (X) Change () Addition Name: CRAIG, WAYNE Name: CRAIG, WAYNE

Address: ONE BEACON STREET, SUITE 1100 Address: ONE BEACON STREET, SUITE 1100

City-St-Zip: BOSTON, MA 02108 City-St-Zip: BOSTON, MA 02108

Title: T () Delete Title: S (X) Change () Addition Name: WILLIAM H. STEPHAN, Name: DUDLEY, NATE

Address: ONE BEACON STREET, SUITE 1100 Address: ONE BEACON STREET, SUITE 1100

City-St-Zip: BOSTON, MA 02108 City-St-Zip: BOSTON, MA 02108

Title: AC () Delete Title: AS (X) Change () Addition

Name: STEPHAN, WILLIAM H Name: STEPHAN, WILLIAM

Address: ONE BEACON STREET, SUITE 1500 Address: ONE BEACON STREET, SUITE 1500

City-St-Zip: BOSTON, MA 02108 City-St-Zip: BOSTON, MA 02108

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM STEPHAN AS 05/01/2006