

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90512 021 ***150.00

DOCUMENT # P28255

1. Entity Name
ANCILLARY SERVICES MANAGMENT, INC.



Principal Place of Business
333 N SUMMIT ST
ATTN: TAX-5
TOLEDO, OH 43604 US

Mailing Address
333 N SUMMIT ST
ATTN: TAX-5
TOLEDO, OH 43604 US

50045132



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

03212005 Chg-P CR2E034 (10/03)

City & State
Zip Country

City & State
Zip Country

4. FEI Number
34-1636874

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO JANNAZO, FRANK 333 N SUMMIT ST TOLEDO, OH 43604 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO ORMOND, PAUL A 333 N SUMMIT ST TOLEDO, OH 43604 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP MEYERS, GEOFFREY G 333 N SUMMIT ST TOLEDO, OH 43604 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCAS MOLER, SPENCER C. 333 N SUMMIT ST TOLEDO, OH 43604 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST GEHRICH, DAVID LEE 333 N SUMMIT ST TOLEDO, OH 43604 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCOO WEIKEL, M KEITH 333 N SUMMIT ST TOLEDO, OH 43604 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P./Director of Tax Kathryn S. Hoops 333 N. Summit St. Toledo, OH 43604 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathryn S. Hoops
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-25-05 (419) 252-5794
Date Daytime Phone #

ATTACHMENT

50045732
P28255

ANCILLARY SERVICES MANAGEMENT, INC.

OFFICERS

Paul A. Ormond	President & Chief Executive Officer
M. Keith Weikel	Sr. Exec. Vice President & Chief Operating Officer
Geoffrey G. Meyers	Executive Vice President, Chief Financial Officer, Treasurer & Assistant Secretary
R. Jeffrey Bixler	Vice President, General Counsel & Secretary
Steven M. Cavanaugh	Vice President, Director of Corporate Development & Assistant Secretary
Nancy A. Edwards	Vice President, General Manager, Central Div.
Larry R. Godla	Vice President, Development & Construction
John K. Graham	Vice President, General Manager, Eastern Division
Jeffrey A. Grillo	Vice President, General Manager, Mid-Atlantic Div.
Kathryn S. Hoops	Vice President, Director of Tax & Assistant Treasurer
William H. Kinschner	Vice President, Director of Management Support Services
David B. Lanning	Vice President, Development
Barry A. Lazarus	Vice President, Director of Reimbursement
Larry C. Lester	Vice President of Marketing, General Manager, Midwest Division
Spencer C. Moler	Vice President, Controller & Assistant Secretary
James P. Pagoaga	Vice President, Rehabilitation Services
Richard W. Parades	Vice President, General Manager, Mid-States Div.
John I. Remenar	Vice President, Director of Financial Services & Assistant Treasurer
F. Joseph Schmitt	Vice President, General Manager, Southern Div.
Steven D. Spencer	Vice President, Director of Human Resources and Labor Relations & Assistant Secretary
Jo Ann Young	Vice President, General Manager of Assisted Living
Martin D. Allen	Assistant Vice President, Director of Internal Audit and Risk Management
David L. Gehrich	Assistant Secretary & Assistant Treasurer
Matthew S. Kang	Assistant Treasurer
Thomas R. Kile	Assistant Treasurer
Frank Janazzo	Director of Operations
David K. Nees	Associate General Counsel & Assistant Secretary

DIRECTOR

R. Jeffrey Bixler

ADDRESS FOR ALL ABOVE IS:

333 N. Summit St.
Toledo, Ohio 43604
Phone: (419) 252-5500