2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33656

Entity Name: EXTENDICARE HOLDINGS, INC.

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
111 W. MIC MILWAUKE	HIGAN ST EE, WI 53203				
Current Mailing Address:			New Maili	New Mailing Address:	
111 W. MICHIGAN ST MILWAUKEE, WI 53203					
FEI Number: 39-1686371 FEI Number Applied For () FEI Nu		FEI Number Not Appl	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Address of New Registered Agent:	
LEXIS DOCUMENT SERVICES INC. 1201 HAYS STREET 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:					
	Electroni	c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () LUKENDA, TIMO 111 W. MICHIGA MILWAUKEE, W	AN STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCAS () CARTER, ROCH 111 W. MICHIGA MILWAUKEE, W	AN ST	Title: Name: Address: City-St-Zip:	VPAS (X) Change () Addition CARTER, ROCH 111 W. MICHIGAN ST MILWAUKEE, WI 53203	
Title: Name: Address: City-St-Zip:	VPCF () HARRIS, DOUGI 111 W. MICHIGA MILWAUKEE, W	AN STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () FOUNTAIN, JILL 3000 STEELES MARKHAM, ONT	IAN E AVE. EAST, STE. 700	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () NELSON, LARAE 111 W MICHIGA MILWAUKEE, W	N STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	AT () Change (X) Addition KREILEIN, JANET L 111 W. MICHIGAN STREET MILWUAKEE, WI 53203	

I hereby certify that the information supplied with this filing does not qualify 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: ROCH CARTER VP 03/25/2009