FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 19 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****200.00 ****200.00
DO NOT WRITE IN THIS SPACE.

DOCUMENT # P94000016265

1. Corporation Name
GENESIS HEALTHCARE MANAGEMENT CO

Principal Place of Business / Mailing Address
60 Cayman Pl.
Palm Beach Gardens, Fl 33418

3. Date Incorporated or Qualified: February 14, 1994
3a. Date of Last Report:

	Principal Place of Business	Mailing Address
2. / 2a.	21 60 Cayman Pl.	26 60 Cayman Pl.
Suite, Apt. #, etc.	22	27
City & State	23 Palm Beach Gardens, Fl	28 Palm Beach Gardens, Fl.
Zip / Country	24 33418 / 25 Palm Beach	29 33418 / 30 Palm Beach

4. FEI Number: 65-0467647 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
WALTER DRIMER
500 S US One Suite 310
Jupiter, Fl 33477

10. Name and Address of New Registered Agent
81 Name: FRANK FANELLA
82 Street Address (P.O. Box Number is Not Acceptable): 60 Cayman Pl.
83
84 City: Palm Beach Gardens FL 85 Zip Code: 33418

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Frank Fanella — FRANK FANELLA — DATE: 4/4/95
(Signature, typed or printed name of registered agent, and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President WALTER DRIMER 300 Ocean Trail Way Apt 1306 Jupiter Fl 33477	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☑ Change ☐ Addition DELETED.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VP Exec. President~~ Secty Alan Sherman 4799 Via Palm Lake #1610 W P B Fl	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☑ Change ☐ Addition Vice Pres. Exec. Secty 2777 Ocean Club Blvd #208 Hollywood, Fl 33019
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer. Frank Fanella 60 Cayman Pl Palm Beach Gardens, Fl.	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☑ Change ☐ Addition Pres. & Treasurer Frank Fanella 60 Cayman Pl. Palm Beach Gardens, Fl. 33418.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition TIS. 4/12/95
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

407-624-9771

SIGNATURE: Frank Fanella — FRANK FANELLA — 4/4/95 — 305-680-7700
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)