SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000023072 (7)

GENESIS COMMUNITY HEALTH CENTER, INC.

FILED Jul 21 1997 8:00am Secretary of State

|--|

Principal Place of	Business	Mailing Address			- 1 180 I 1981 F	HE TOTAL DIGHT DOWN EDING	HAILE BRAND II BOOD (III			
7385 SW 87 AVE., STE. 300 7385 SW 87 AVE., STE, 300										
MIAMI FL 33143 MIAMI FL 33143						DO NOT WRITE IN THIS SPACE				
					3. Date Incorp	orated or Qualified			eport	
					03/14/19	996				
2. Principal Place	of Business	2a. Mailing Address			4. FEI Numbe	r	·· · · · · · · · · · · · · · · · · · ·	Ap	plied For	
21	26				59061		No	1 Applicable		
Suite, Apt. #, e	etc.	Suite, Apl. #, etc.			5. Certificate	of Status Desired	□ \$		Additional	
22 City & State		City & State			A Floring 0			Fee Re		
23		28				mpaign Financing Contribution		\$5.00 Added t		
Zip	Country	Zip	Count	ry		ation owes or has p	aid the current	year Int	angible	
24	25	29	30			operty Tax due Jur			1/1/0	
	Name and Address of Curre	nt Registered Agent		<u> </u>	***************************************	Address of New F	tegistered Age	nt		
	KMYER, GARY		8	1 56se	R. F	u 10LS	•			
	BISCAYNE BLVD., #830		8	2 Sireet Addre	ess (P.O. Box Nur	nber is Not Appept	able) 12	-	# 40	
MIAMI	FL 33131		8	11+4	WAT (0)	nber is Not Appept	UK 170	6D	7. 101	
			l°	12701	S.W.	Lejun	e Rd			
	1	\circ	8	4 City np	AL COL	bus	FL®	5 Zip (2126	
11. Pursuant to th	he provisions of Rections 607 050	and 607. 1208, Forida State	les, the abo	ve-named corp	oration submits th	is statement for the	purpose of cha	anging it	s registored	
office or regis	stered agent, or both, in the State amiliar with and accept the oblig	of Florida, Such (hafige was	authorized I Jorida Statut	by the corporali	on's board of dire	ctors. Thereby acc	ept the appoint	ment as	registered	
SIGNATURE	1886	Kill !	TOTAL CICIO			1/15/9	7		İ	
Sign	ature, typed or printed name of registered ag		TE Registered A	geni signature reduis		71-1-1	DATE			
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/	CHANGES TO OFF				
	REBSTOCK, JOHN	☐ DELETE	1.1 Tille				L	Change	Addition :	
) ····	7385 SW 87 AVE., STE. 300		1.2 NAM)					};	
L L	MIAMI FL 33143			ET ADDRESS					Į.	
0111 01 14	DT	DELETE	1.4 CHY 2 1 THUE					Change	Addition	
	SENRA, MAGGIE		2 2 NAM				را	unange	L YOURGE !	
	7385 SW 87 AVE., STE. 300		1	E1 ADDRESS					}	
	MIAMI FL 33143			-S1-7IP						
TITLE		DELFTE	3.1 TITLE					Change	Addition	
NAME		-	3.2 NAM					-		
STREET ADDRESS			3.3 STRE	ET ADDRESS						
CITY-ST-ZIP			3.4. CITY	- ST - 7IP						
TITLE		DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAM	NE)					}	
STREET ADDRESS			4.3 STRE	ET ADDRESS						
CITY-S1-ZIP			4.4 City	-ST-ZIP						
TITLE		DELETE	51 TITLE					Change	Addition	
NAME			5.2 NAM						-	
STREET ADDRESS			5.3 STRE	ET ADDRESS						
CITY-ST-ZIP		Drutte	5.4 CITY				 	Channa	Addition	
TITLE		☐ DELETE	6.1 1171.6				ليا	Change	Addition	
NAME			6.2 NAM	í						
STREET ADDRESS				ET ADDRESS						
City-St-ZiP	ertify that the information supplie	d with this filing does not qua	6.4 City		in Section 119 07	(3)(i). Florida Statu	es. I further cer	tify that	lhe	

The bridge of the first that the information supplies with this iming does not quality in the exemption indicated in section 118.073(i), Florida Statutes. In the Francisco information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the conversion or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the com-appears in Block 12 or Plock 13 if

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # P96000 IS COMMUNITY HEALTH CE				
Principal Place of Business 7385 SW 87 AVE., STE. 300 MIAMI FL 33143		Mailing Address 7385 SW 87 AVE., STE. 30 MIAMI FL 33143	00		
				3. Date Incorporated or Qualified	IN THIS SPACE 3a. Date of Last Report
				03/14/1996	
	lace of Business	2a. Mailing Address		4. FEI Number 65-0759061	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>	T	Not Applicable S8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	7 _{IP}	Country	Trust Fund Contribution	Added to Fees
24	25	- h	30	This corporation owes or has participated Personal Property Tax due June	prom prom
	g, Name and Address of Current			10. Name and Address of New Re	gistered Agent
	DOKMYER, GARY		81 565e	R. Pulous	
	S. BISCAYNE BLVD., #830 MI FL 33131		82 Street Addre	ess (P.O. Box Number is Not Asseptal	30 BLGD # 401
IMIA	MI FL 33131		83		<u>~ 1</u>
		_	2701	S.W. Lejun	· · · · · · · · · · · · · · · · · · ·
	1 -	~ 0.0	84 CitCOR	AL COADICS	FL 85 76 Code 3 8 1 3 6
11. Pursuant t	to the provisions of Rections 607,0503	and 007.1508, Forida Statuler	s, the above-named corp	oration submits this statement for the pon's board of directors. Thereby acce	purpose of changing its registered
agent. I a	n (amiliar with and accort the obligat	lio is of, Section 607.0505, Flor	ida Statutes.	on's board of directors, profeby acce	pt the appointment as registered
SIGNATURE	X for 1) 7	t will live it applicable (NOTE	Registered Agent's gnature require	7/11/1/	DAIL
12.	Signature, typed or punted name of registered agen OFFICERS AND	1 - 1	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DPS	☐ DELETE	1.1 Till (☐ Change ☐ Addition
NAME	REBSTOCK, JOHN		1.2 NAME		
STREET ADDRESS	7385 SW 87 AVE., STE. 300 MIAMI FL 33143		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DT DT	DELETE	2.1 10 LE		Change Addition
NAME	SENRA, MAGGIE	La battist	22 NAME		C change C votiding
STREET ADDRESS	7385 SW 87 AVE., STE. 300		2 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33143		2 4 City - S1 - 7(P		
TITLE		☐ DELETE	3.1 1111.6		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP TITLE		☐ DELETE	3.4. CHY-ST-ZIP 4.1 TILE		Change Addition
NAME			4. 2 NAME		American Company of States Com
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP	1131.1	
TITLE		☐ OTLFTE	5.1 TITLE		Change Addition
NAME CONCER ADDRESS			5.2 NAME		
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CHY+ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	as position that the information of the	with this till— slage and a 100	64 CHY-SI-7IP	in Continu 110 07/0V/3 11-14- 01 11	o Hudhor porticition of
information	n indicated on this annual report or su ficer or director of the constration or to Block 12 or Block 13 items and or	implemental annual report is tru he receiver or trustee empowe	ie and accurate and that red to execute this report	in Section 119.07(3)(i), Florida Statute my signature shall have the same logg as required by Chapter 607, Florida S	al effect as if made under oath; that Statutes; and that my name