

VD9838

Florida Department of State
Division of Corporations
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Account Name : C T CORPORATION SYSTEM
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04 APR 13 AM 11:30
DIVISION OF CORPORATIONS

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REGISTERED AGENT CHANGE
SENIOR HEALTH DIVISION, INC.

Certificate of Status	0
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Corporate Filing

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RA change
of

APR-13-2004 11:21

CT CORPORATION

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0501, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Senior Health Division, Inc.
2. The principal office address: 6666 East 75th Street, Suite 500, Indianapolis Indiana 46250
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/27/1992 Document number: V09838
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Heather L. North
2536 Countryside Boulevard, Sixth Floor
Clearwater, Florida 33763

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
CT Corporation System
1200 South Pine Island Road
Plantation, Florida 33324

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Melanie S. Otto (Signature of an officer or director) Melanie S. Otto, President (Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Cornis Bauer (Signature of Registered Agent) Secretary 4/13/04 (Date)

If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314