

2022 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000033926

Entity Name: GENESISCARE USA, INC.**Current Principal Place of Business:**2270 COLONIAL BLVD
FORT MYERS, FL 33907**Current Mailing Address:**2270 COLONIAL BLVD
ATTN: TAX DEPARTMENT
FORT MYERS, FL 33907 US**FEI Number:** 65-0768951**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CEO, CHAIR
Name	COLLINS, DAN
Address	2270 COLONIAL BOULEVARD
City-State-Zip:	FORT MYERS FL 33907

Title	TREASURER
Name	WOODWARD, ALLAN
Address	2270 COLONIAL BLVD
City-State-Zip:	FORT MYERS FL 33907

Title	DIRECTOR
Name	COUNCIL, LAVERNE H.
Address	2270 COLONIAL BLVD
City-State-Zip:	FORT MYERS FL 33907

Title	DIRECTOR
Name	ROSENBACH, ERIC
Address	2270 COLONIAL BLVD
City-State-Zip:	FORT MYERS FL 33907

Title	DIRECTOR
Name	CURRAN, JR. MD, WALLY J.
Address	2270 COLONIAL BLVD
City-State-Zip:	FORT MYERS FL 33907

Title	SECRETARY
Name	SEAL, JACK
Address	2270 COLONIAL BLVD
City-State-Zip:	FORT MYERS FL 33907

I hereby 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 all other like empowered.

SIGNATURE: ALLAN WOODWARD**TREASURER****05/09/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date