#### 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000735

Entity Name: GENESIS ELDERCARE PHYSICIAN SERVICES, INC.

FILED
Jan 02, 2018
Secretary of State
CC1819539045

## **Current Principal Place of Business:**

101 EAST STATE STREET KENNETT SQUARE. PA 19348

# **Current Mailing Address:**

101 EAST STATE STREET KENNETT SQUARE. PA 19348 US

FEI Number: 06-1156428 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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
 OFFICER
 Title
 OFFICER

 Name
 FEUERMAN, JASON
 Name
 SHAPIRO, ERIC

Address 101 EAST STATE STREET Address 101 EAST STATE STREET

City-State-Zip: KENNETT SQUARE PA 19348 City-State-Zip: KENNETT SQUARE PA 19348

Title OFFICER Title OFFICER

Name SHERMAN, MICHAEL S Name REITZ, ROBERT A

Address 101 EAST STATE STREET Address 101 EAST STATE STREET

City-State-Zip: KENNETT SQUARE PA 19348

City-State-Zip: KENNETT SQUARE PA 19348

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: MICHAEL S SHERMAN

**OFFICER** 

01/02/2018