

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22747

FILED
Mar 16, 2011
Secretary of State

Entity Name: GENTIVA CERTIFIED HEALTHCARE CORP.

Current Principal Place of Business:

3 HUNTINGTON QUADRANGLE
2 SO.
MELVILLE, NY 11747

New Principal Place of Business:

3350 RIVERWOOD PARKWAY
SUITE 1400
ATLANTA, GA 30339

Current Mailing Address:

3 HUNTINGTON QUADRANGLE
2 SO.
MELVILLE, NY 11747

New Mailing Address:

3350 RIVERWOOD PARKWAY
SUITE 1400
ATLANTA, GA 30339

FEI Number: 11-2645333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P D
Name: STRANGE, TONY
Address: 3350 RIVERWOOD PKWY, STE1400
City-St-Zip: ATLANTA, GA 30339 US

Title: CHMN
Name: STRANGE, TONY
Address: 3350 RIVERWOOD PARKWAY, STE. 1400
City-St-Zip: ATLANTA, GA 30339 US

Title: T D
Name: SLUSSER, ERIC R
Address: 3350 RIVERWOOD PARKWAY, STE. 1400
City-St-Zip: ATLANTA, GA 30339 US

Title: S D
Name: CAMPERLENGO, JOHN N
Address: 3350 RIVERWOOD PARKWAY, STE. 1400
City-St-Zip: ATLANTA, GA 30339 US

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: JOHN N. CAMPERLENGO

S

03/16/2011

Electronic Signature of Signing Officer or Director

Date