

FILE NOW: FILING FEE IS \$61.25

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Jul 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 763935 (4) *MC 12/2/97*

1. Corporation Name
~~HOSPICE OF HILLSBOROUGH, INCORPORATED~~
 LifePath, Inc.
 d/b/a LifePath Hospice

Principal Place of Business	Mailing Address
3010 W AZEELE ST TAMPA FL 33609	3010 W AZEELE ST TAMPA FL 33609

3. Date Incorporated or Qualified
 06/28/1982

4. FEI Number 59-2264957	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

~~THAL, ANNE E.~~
 3010 W AZEELE ST
 TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name Kathy L. Fernandez (Interim CEO)
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Kathy L. Fernandez* **DATE:** 4/30/98

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
D	CHAMBERS, REV. LARRY - D	910 BRYAN ROAD	BRANDON FL	
D	DEITKE, MAX C.	4439 VIEUX CARRE CIRCLE	TAMPA FL	<input type="checkbox"/> DELETE
D	REDDY, FREDERICK	4927 B RIVERSHORE DRIVE	TAMPA FL	<input type="checkbox"/> DELETE
D	WALLER, LAURA	100 N TAMPA STREET, SUITE 2930	TAMPA FL	<input type="checkbox"/> DELETE
D	MELENDI, SUE	100 SOUTH ASHLEY DRIVE, SUITE 1650	TAMPA FL	<input checked="" type="checkbox"/> DELETE
D	HENTHORNE, KEITH	120 HYDE PARK PLACE, SUITE 100	TAMPA FL	<input checked="" type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Chairman	Richard E. Ludwig - D	702 North Franklin Street	Tampa, Florida 33602	
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Treasurer - D	Rene J. Zarate	2303 Sunview Avenue	Vairico, Florida 33594	
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Secretary	Barbara Browning - D	P.O. Box 1214	Tampa, Florida 33601	
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		000002591430		
		-07/17/98--01008--045		
		***61.25		
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Kathy L. Fernandez* **DATE:** 4/30/98

CR2E037 (10/97)