

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 25, 2004
Secretary of State**

DOCUMENT# 765654

Entity Name: FLORIDA HOSPICES AND PALLIATIVE CARE, INC.

Current Principal Place of Business:

1616-D METROPOLITAN CIR.
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

1616-D METROPOLITAN CIR.
TALLAHASSEE, FL 32308 US

New Mailing Address:

FEI Number: 59-2685885 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOMANT, SUSANNE F
1616 D METROPOLITAN CR.
TALLAHASSEE, FL 32308 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: CEOD () Delete
Name: BARTELT, ELAINE C
Address: 1723 MAHAN CENTER BLVD
City-St-Zip: TALLAHASSEE, FL 323085428 US

Title: CEOD () Delete
Name: PALUMBO, ANTHONY
Address: 1723 MAHAN CENTER BLVD
City-St-Zip: TALLAHASSEE, FL 323085428 US

Title: CEOD () Delete
Name: PONER-STANSEI, SUSAN
Address: 1723 MAHAN CENTER BLVD
City-St-Zip: TALLAHASSEE, FL 323085428 US

Title: CEOD () Delete
Name: KNEE, DALE O
Address: 1723 MAHAN CENTER BLVD
City-St-Zip: TALLAHASSEE, FL 323085428 US

Title: CEOD () Delete
Name: GETZ, MORTON E
Address: 1723 MAHAN CENTER BLVD
City-St-Zip: TALLAHASSEE, FL 323085428

Title: ED () Delete
Name: HOMANT, SUE
Address: 1723 MAHAN CENTER BLVD
City-St-Zip: TALLAHASSEE, FL 323085428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LEHOTSKY, PATRICIA
Address: 12300 LANE PARK ROAD
City-St-Zip: TAVARES, FL 32778 US

Title: VP (X) Change () Addition
Name: PRIVETT, ALICE
Address: 3231 SW 34TH ST
City-St-Zip: OCALA, FL 34473 US

Title: VP (X) Change () Addition
Name: HARLEY, DEBORAH
Address: 3800 WOODBRIAR TRAIL
City-St-Zip: PORT ORANGE, FL 32129 US

Title: SECY (X) Change () Addition
Name: MAISTO, MARGE
Address: 5955 RAND BLVD
City-St-Zip: SARASOTA, FL 34238 US

Title: TRES (X) Change () Addition
Name: TAYLOR, CLARK
Address: 5151 ADANSON STREET, #200
City-St-Zip: ORLANDO, FL 32804 US

Title: ED (X) Change () Addition
Name: HOMANT, SUSANNE F
Address: 1616 D METROPOLITAN CR
City-St-Zip: TALLAHASSEE, FL 32308 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSANNE F. HOMANT

ED

04/25/2004

Electronic Signature of Signing Officer or Director

Date