FILE NOW: FILING FEE IS \$61.25

FILED Mar 31 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State Sandra B. Moffham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # (2)N01467 HOSPICE OF LAKE AND SUMTER, INC. Principal Place of Business Mailing Address 12300 LANE PARK RD 12300 LANE PARK RD 3. Date Incorporated or Qualified TAVARES FL 32778-9660 TAVARES FL 32778-9660 02/15/1984 4. FEI Number Applied For 59-2330114 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 28 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 22 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes XX No 23 28 Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes XX No 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Same MCDANIEL, MARY Street Address (P.O. Box Number is Not Acceptable) **B2** 226 W. ALFRED ST 83 TAVARES FL 32778 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. TITLE DELETE 1.1 TITLE Change Fred Morrison - President BEYERS, ROGER 1.2 NAME NAME STREET ADORESS 1123 W MAIN ST 1.3 STREET ADDRESS Leesburg, FL 34749 LEESBURG FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE X Change Addition 2.1 TITLE TITLE DUPEE, ANN 2.2 NAME NAME Same 389 DIVISION STREET 2.3 STREET ADDRESS STREET ADDRESS **CLERMONT FL** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 900002475926hange Addition 3.1 TITLE TITLE -04/01/98--01093--015 HINDMAN, SCOTT 3.2 NAME NAME Same*122.50 700 BOYLESTON STREET STREET ADDRESS 3.3 STREET ADDRESS LEESBURG FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE TITLE 4.1 TITLE Alton Roane - Vice President BINNEVELD, BILL 4 2 NAME NAME 12318 Tavares Ridge Court 1211 N BLVD WEST STREET ADDRESS 4.3 STREET ADDRESS Tavares, FL 32778 LESSBURG FL 4.4 CITY-ST-ZIP CITY - ST - ZIP Bill Talley, Jr. Pres. Elect ☐ Addition DELETE 5.1 TITLE ' TITLE 5.2 NAME A MORRISON, FRED NAME 900 N. 14th Street

14. hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, if urther 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. 3523431341

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

6.1 TITLE

S 2 NAME

DELETE

Leesburg, FL

214 N. 5th Street

Leesburg, FL 34749

Tom Newman

SIGNATURE: Rebecca McDonald, CEO SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

1000 W MAIN STREET

504 LEMON STREET

LEESBURG FL

LUNDY, R. E

EUSTIS FL

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

Change

☐ Addition