

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01467

FILED
Jan 21, 2008
Secretary of State

Entity Name: HOSPICE OF LAKE AND SUMTER, INC.

Current Principal Place of Business:

12300 LANE PARK RD
TAVARES, FL 327789660 US

New Principal Place of Business:

2445 LANE PARK ROAD
TAVARES, FL 327789660 US

Current Mailing Address:

12300 LANE PARK RD
TAVARES, FL 327789660 US

New Mailing Address:

2445 LANE PARK ROAD
TAVARES, FL 327789660 US

FEI Number: 59-2330114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEHOTSKY, PATRICIA
12300 LANE PARK ROAD
TAVARES, FL 32778 US

Name and Address of New Registered Agent:

LEHOTSKY, PATRICIA
2445 LANE PARK ROAD
TAVARES, FL 32778 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: PATRICIA LEHOTSKY

01/21/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: WINDSOR, SCOTT M
Address: 1300 W. CITIZENS BLVD.
City-St-Zip: LEESBURG, FL 34748 US

Title: SD () Delete
Name: RICCI, SUSAN
Address: 9501 US HIGHWAY 441
City-St-Zip: LEESBURG, FL 34788 US

Title: D () Delete
Name: LONGACRE, LESLIE
Address: 1099 CITRUS TOWER BLVD
City-St-Zip: CLERMONT, FL 34711 US

Title: D () Delete
Name: ELISCU, ANDREA T
Address: PO BOX 547478
City-St-Zip: ORLANDO, FL 328547478 US

Title: PD () Delete
Name: NELDON, GREGORY
Address: 2701 S. BAY STREET
City-St-Zip: EUSTIS, FL 32726 US

Title: VD () Delete
Name: MCKEE, BOB
Address: 7205 NORTH SHORE DR
City-St-Zip: LEESBURG, FL 34788 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: RICCI, SUSAN
Address: 103 PEPPERTREE COURT
City-St-Zip: YALAHA, FL 34797 US

Title: D (X) Change () Addition
Name: DUDLEY, GAIL
Address: 1749 DAVID WALKER DRIVE
City-St-Zip: TAVARES, FL 32778 US

Title: D (X) Change () Addition
Name: GLENN, JONES G
Address: P.O. BOX 93158
City-St-Zip: LAKELAND, FL 338043158 US

Title: PD (X) Change () Addition
Name: NELSON, GREGORY
Address: 2701 S. BAY STREET
City-St-Zip: EUSTIS, FL 32726 US

Title: VD (X) Change () Addition
Name: STONE, LEWIS W
Address: 4850 NORTH HIGHWAY 19A
City-St-Zip: MOUNT DORA, FL 32757 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GREGORY NELSON

PD

01/21/2008

Electronic Signature of Signing Officer or Director

Date