

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N06783

FILED
Apr 11, 2002 8:00 AM
Secretary of State

Entity Name: HALIFAX HOSPICE, INC.

Current Principal Place of Business:

3800 WOODBRIAR TRAIL
PONT ORANGE, FL 32119 US

New Principal Place of Business:

3800 WOODBRIAR TRAIL
PORT ORANGE, FL 32119 US

Current Mailing Address:

303 N. CLYDE MORRIS BLVD.
ATTN: LEGAL DEPT.
DAYTONA BEACH, FL 32114 US

New Mailing Address:

FEI Number: 59-2661284 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDSON, DAVID J.
303 N. CLYDE MORRIS BLVD
DAYTONA BEACH, FL 32114 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 () Delete
Name: HARLEY, DEBORAH
Address: 3800 WOODBRIAR TRAIL
City-St-Zip: PORT ORANGE, FL 32119 US

Title: VD () Delete
Name: GRIFFIN, WILLIAM J
Address: 6193 SHORELINE DR
City-St-Zip: PORT ORANGE, FL 32119 US

Title: STD () Delete
Name: ROUSIS, GEORGE M
Address: 104 S. BEACH STREET
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: D () Delete
Name: DAVIS, DOUG
Address: 901 6TH ST
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: D () Delete
Name: PECK, EDWIN W JR.
Address: 2425 S. ATLANTIC AVE
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: D () Delete
Name: BAUMEIER, SALLY
Address: 81 WILDWOOD AVENUE
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GRIFFIN, WILLIAM J
Address: 6193 SHORELINE DR
City-St-Zip: PORT ORANGE, FL 32119 US

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

Title: CD (X) Change () Addition
Name: DAVIS, DOUG
Address: 238 QUAY ASSISI
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: D (X) Change () Addition
Name: FOSTER, JAMES R
Address: 1041 DUNLAWTON AVENUE
City-St-Zip: PORT ORANGE, FL 32119 US

Title: VD (X) Change () Addition
Name: BAUMEIER, SALLY
Address: 81 WILDWOOD AVENUE
City-St-Zip: ORMOND BEACH, FL 32174 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: DEBORAH HARLEY

P

04/11/2002

Electronic Signature of Signing Officer or Director

_____ Date

SMITH, M.D., ALVIN
2032 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176

KERMAN, M.D., HERBERT (D)
2616 PENINSULA DRIVE
DAYTONA BEACH, FL 32118

MENDEZ-MIX, ARLENE (D)
2730 BEAVER DRIVE
DELTONA, FL 32725

SNELL, GREG (D)
222 SEABREEZE BOULEVARD
DAYTONA BEACH, FL 32118

BAILEY, RICHARD (D)
1304 JULIA STREET
NEW SMYRNA BEACH, FL 32168

DEPARRY, ASTRID (D)
107 EAST CHURCH STREET
DELAND, FL 32724

THOMPSON, JR., HERBERT W. (D)
240 NORTH ADAMS STREET
DAYTONA BEACH, FL 32114

LEONARD, AL (D)
55 FAIRWAY CIRCLE
NEW SMYRNA BEACH, FL 32168