FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR -7 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N27921 (8)

1. Corporation Name
HOSPICE FOUNDATION OF LAKE AND SUMTER, INC.

Principal Place of Business	Mailing Address
12300 LANE PARK ROAD TAVARES FL 32778-6660	12300 LANE PARK ROAD TAVARES FL 32778-6660

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/17/1988
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2915060 ☐ Applied For ☐ Not Applicable
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip* 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SYKES, PATRICIA A.
12300 LANE PARK RD
TAVARES FL 32778

10. Name and Address of New Registered Agent

81 Name: MARSHALL H. HUX
82 Street Address (P.O. Box Number is Not Acceptable): 400 WEBSTER ST
83
84 City: LEESBURG, FL 85 Zip Code: 34748

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Marshall H Hux 1/27/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P	☒ Change ☐ Addition
NAME	SIMPSON, ANITA	1.2 NAME	WAYNE C. BAILEY	
STREET ADDRESS	445 LIMIT AVE	1.3 STREET ADDRESS	15930 N HWY 441	
CITY-ST-ZIP	MT. DORA FL	1.4 CITY-ST-ZIP	EUSTIS, FL 32726	
TITLE	VP	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	BAILEY, WAYNE	2.2 NAME	JOE HOLMES	
STREET ADDRESS	602 N HWY 441	2.3 STREET ADDRESS	200 E FIFTH AVE	
CITY-ST-ZIP	EUSTIS FL	2.4 CITY-ST-ZIP	MT DORA, FL 32757	
TITLE	ST	3.1 TITLE	S/T	☒ Change ☐ Addition
NAME	AMOS, PATRICIA SYKES	3.2 NAME	MARSHALL H HUX	
STREET ADDRESS	17025 PERU RD	3.3 STREET ADDRESS	400 WEBSTER ST	
CITY-ST-ZIP	UMATILLA FL	3.4 CITY-ST-ZIP	LEESBURG, FL 34748	
TITLE	D	4.1 TITLE	D	☐ Change ☐ Addition
NAME	RATH, ROGER DR.	4.2 NAME	Dr. Roger Rath - 901 N Grove	
STREET ADDRESS	P.O. BOX 500	4.3 STREET ADDRESS	PO Box 500	
CITY-ST-ZIP	EUSTIS FL 00	4.4 CITY-ST-ZIP	Eustis, FL 32726	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	BEUCHER, BUD	5.2 NAME	BUD BEUCHER	
STREET ADDRESS	10400 CR 48	5.3 STREET ADDRESS	1100 MAIN ST	
CITY-ST-ZIP	HOWEY IN THE HILLS FL	5.4 CITY-ST-ZIP	LADY LAKE, FL 32159	
TITLE	D	6.1 TITLE	D	XX Change ☐ Addition
NAME	HOLMES, JOE	6.2 NAME	C. EDWARD BROOKS, III	714 N. Donnelly
STREET ADDRESS	200 E FIFTH AVE	6.3 STREET ADDRESS	PO BOX 1406	
CITY-ST-ZIP	MT DORA FL	6.4 CITY-ST-ZIP	MT DORA, FL 32757	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Marshall H Hux 1/27/95 904 787 3445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

D95A18

N27921

January 1994

HOSPICE FOUNDATION OF LAKE & SUMTER, INC.

BOARD OF DIRECTORS

Wayne Bailey
Dean Witter Reynolds
15930 N. Hwy 441
Eustis, Florida 32726
(w) 483-5912

Bud Beucher
1100 Main St
Lady Lake, FL 32159
(w) 753-2270

C. Edward Brooks, III
Sr. Vice Pres. 1st National Bank Mt Dora — 714 N. Donnelly St
P.O. Box 1406
Mount Dora, Florida 32757
(w) 383-2140

Nora J. Hill
P.O. Box 586
Leesburg, Florida 34749-0586
(w) 326-5677

Joe Holmes
Sunbank
200 E. Fifth Ave.
Mount Dora, Florida 32757
(w) 326-4601

Marshall Hux
400 Webster St.
Leesburg, Florida 34748
(w) 787-3445

Dr. Robert Krauklis
4820 Highway 19A
Mount Dora, Florida 32757
(w) 589-9550

1000 W. Main St NZ 7921

Fred Morrison
PO Box 491357
Leesburg, Fl 34749-1357
(w) 787-1241
(h) 728-6194

William Ohme
133 Royal Palm Drive
Leesburg, Florida 34748
(h) 787-6980

1330 W Citizens Blvd

Steve Pullum
P.O. Box 492160
Leesburg, Florida 34749-2160
(w) 728-3060

Dr. Roger Rath
P.O. Box 500 — 90% N. Grove St.
Eustis, FL 32727-0500
(w) 589-2020

N/A

Timothy Sennett
PO Box 491308
Leesburg, FL 34749-1308
(w) 326-0411

Anita Simpson
445 Limit Ave.
Mount Dora, Florida 32757
(h) 383-6353

Mary Stenger
3513 Indian Trail - Bright Water Place
Eustis, Florida 32726
(h) 483-3478

Patricia Sykes-Amos
17025 Peru Road
Umatilla, Florida 32784
(w) 383-6300