

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N27921 (8)
1. Corporation Name
HOSPICE FOUNDATION OF LAKE AND SUMTER, INC.



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

Mailing Address
12300 LANE PARK ROAD
TAVARES FL 32778-6660

3. Date Incorporated or Qualified
08/17/1988

3a. Date of Last Report
04/07/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30 LAKE

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HUX, MARSHALL H.
400 WEBSTER ST.
LEESBURG FL 34748

10. Name and Address of New Registered Agent

81 Name Patricia Sykes-Amos

82 Street Address (P.O. Box Number is Not Acceptable)
17025 Peru Rd

83 Umatilla, FL 32784

84 City Umatilla FL 85 Zip Code 32784

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 *Patricia A. Sykes-Amos*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 2/28/96

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME BAILEY, WAYNE C.

STREET ADDRESS 15930 N HWY 441

CITY-ST-ZIP EUSTIS FL

TITLE VP ☐ DELETE

NAME HOLMES, JOE

STREET ADDRESS 200 E FIFTH AVE

CITY-ST-ZIP MT DORA FL

TITLE ST ☐ DELETE

NAME HUX, MARSHALL H

STREET ADDRESS 400 WEBSTER ST

CITY-ST-ZIP LEESBURG FL

TITLE D ☐ DELETE

NAME RATH, ROGER DR.

STREET ADDRESS P. O. BOX -901 N. GROVE

CITY-ST-ZIP EUSTIS FL

TITLE D ☐ DELETE

NAME BEUCHER, BUD

STREET ADDRESS 1100 MAIN ST

CITY-ST-ZIP LADY LAKE FL

TITLE D ☒ DELETE

NAME BROOKS, III C

STREET ADDRESS P. O. BOX 1406-714 N. DONNELLY

CITY-ST-ZIP MT. DORA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME Joseph Holmes

1.3 STREET ADDRESS 900 N 14th St

1.4 CITY-ST-ZIP Leesburg, FL 34749-2160

2.1 TITLE Vice President VP ☒ Change ☐ Addition

2.2 NAME Bud Beucher

2.3 STREET ADDRESS 1100 Main St

2.4 CITY-ST-ZIP Lady Lake, FL 32159

3.1 TITLE Secretary/Treasurer ST ☒ Change ☐ Addition

3.2 NAME Patricia Sykes-Amos

3.3 STREET ADDRESS 17025 Peru Rd

3.4 CITY-ST-ZIP Umatilla, FL 32784

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME 000001730910

4.3 STREET ADDRESS 03/04/96--01082--008

4.4 CITY-ST-ZIP ***61.25

5.1 TITLE Director D ☒ Change ☐ Addition

5.2 NAME Wanda Andrews

5.3 STREET ADDRESS 847 Eighth St

5.4 CITY-ST-ZIP Clermont, FL 34711

6.1 TITLE Director D ☒ Change ☐ Addition

6.2 NAME Jill Bavetta

6.3 STREET ADDRESS 8917 Silver Lake Dr

6.4 CITY-ST-ZIP Leesburg, FL 34748

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)(k), 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: *Patricia A. Sykes-Amos*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 1/22/96

Daytime Phone #

(352)
343-1341

CR2E037 (12/95)

January 1996

HOSPICE FOUNDATION OF LAKE & SUMTER, INC.
BOARD OF DIRECTORS

TERM EXPIRES - December 31, 1996

Bud Beucher (Vice President)	(w) 753-2270
1100 Main Street	(f) 753-6224
Lady Lake, FL 32159	

Anita Simpson	(h) 383-6353
445 Limit Avenue	
Mount Dora, FL 32757	

Steve Pullum	
P. O. Box 492160	(f) 728-0003
Leesburg, FL 34749-2160	(w) 728-3060

Dr. Roger Rath	
P.O. Box 500	
Eustis, FL 32727-0500	(w) 589-2020

TERM EXPIRES - December 31, 1997

Joe Holmes (President)	
SunTrust Bank	
900 N 14th Street	(w) 326-4642
Leesburg, FL 34748	(f) 326-4623

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

VACANCY

Patricia Sykes-Amos (Sec/Treas)	(w) 383-6300	
17025 Peru Road	(w) 394-6353	Clermont
Umatilla, FL 32784	(h) 669-2614	
	(f) 383-6458	

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TERM EXPIRES - DECEMBER 31, 1998

Wanda Andrews
South Lake Memorial
847 Eighth Street
Clermont, FL 34711

(w) 394-4071
(f)

Mr. Wayne Bailey
Dean Witte Reynolds
15930 N. Hwy 441
Eustis, FL 32726

(w) 483-5912
(f) 483-5903

Mrs. Jill Bavetta
8917 Silver Lake Drive
Leesburg, FL 34748

(h) 365-6119

Mr. Marshall Hux
400 Webster Street
Leesburg, FL 34748

(w) 787-3445
(f) 787-3493

Mr. William Kicklighter
P.O. Box 600
Umatilla, FL 32784

(w) 589-2121

OPERATING BOARD REPRESENTATIVES

Scott Hindman (President, Operations)
PO Box 492434
Leesburg, FL 34749-2434

(w) 787-3445
(f) 787-9922

Fred Morrison (Secretary, Operations)
PO Box 491357
Leesburg, FL 34749-1357

(h) 728-6194
(w) 787-1241

R.E. Lundy (Chair Personnel & Finance, Oper)
504 Lemon St
Eustis, FL 32726

(w) 669-2133
(f) 669-1170

WOMEN FOR HOSPICE REPRESENTATIVE

Claire Weston
970 Fairview Ave
Mount Dora, FL 32757

(h) 383-0580