FILED .2002 UNIFORM BUSINESS REPORT (UBR) Mar 22, 2002 8:00 am P96000078107 DOCUMENT # Secretary of State 1. Entity Name 03-22-2002 90012 037 ***158.75 HOSPICARE, INC. Principal Place of Business Mailing Address -240 EISENHOWER DR 125 WEST-ROMANA STREET -STE C-13" SUITE 400 BILOXI-MS 30531-PENSACOLA FL 32501 HS 2. Principal Place of Business 3. Mailing Address HLO MENGE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3406505 แรร Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BELL, SCOTT J Street Address (P.O. Box Number is Not Acceptable) 125 WEST-ROMANA-STREET SUITE 400 PENSACOLA FL 32501 City Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition NAME BELL, SCOTT J NAME 2 N. Palafox Street STREET ADDRESS 125 WEST ROMANA STREET SUITE 400-STREET ADDRESS CITY-ST-ZIP Penacola Fl CITY-ST-ZIP ۷P ☐ Delete TITLE ☐ Addition 2 N Palafox Street NAME TREHERN, W. EDWARD NAME STREET ADDRESS 125 W ROMANA ST, STE-400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Pensacola fl TITLE . Delete TITLE Change ☐ Addition NAME NAME foster, dana r STREET ADDRESS STREET ADDRESS 125 W ROMANA ST, STE 400 CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL TITLE ☐ Delete TITLE 🔽 Change ☐ Addition NAME Tolan, John J. Jr NAME STREET ADDRESS STREET ADDRESS 125 W ROMANA ST. STE 400 CITY-ST-7IP CITY-ST-7IP PENSACOLA FL TITLE ☐ Delete TITLE NAME WILLIAMS, ROY C NAME STREET ADDRESS 125 W ROMANA ST. STE-400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL ☐ Delete TITLE NAME HOLLOWAY, J.L. NAME 125 W ROMANA ST. STE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address,

SIGNATURE:

CR2E034 (9/01)