

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR -3 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G87584** (0)
1. Corporation Name
VITAS HEALTHCARE CORPORATION OF FLORIDA

Principal Place of Business Mailing Address
100 S. BISCAYNE BLVD.
SUITE 1500
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **01/12/1984** 3a. Date of Last Report **07/05/1994**

4. FEI Number **65-0160635** 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

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 25 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature (Typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CTD
NAME	WESTBROOK, HIGH A
STREET ADDRESS	100 S. BISCAYNE BLVD
CITY - ST - ZIP	MIAMI FL
TITLE	DV
NAME	COLLIFLOWER, ESTHER T
STREET ADDRESS	100 S. BISCAYNE BLVD
CITY - ST - ZIP	MIAMI FL
TITLE	DV
NAME	WILLIAM, J. RICHARD
STREET ADDRESS	100 S BISCAYNE BLVD
CITY - ST - ZIP	MIAMI FL
TITLE	DP
NAME	COLLIER, EARL M JR
STREET ADDRESS	100 S BISCAYNE BLVD
CITY - ST - ZIP	MIAMI FL
TITLE	VS
NAME	OHLENDORF, MARK W
STREET ADDRESS	100 S BISCAYNE BLVD
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	Please see Attachment A
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mark Ohlendorf
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR
Mark Ohlendorf, Vice President

2/23/95

305/350-5922

Date

Telephone/Fax #

ATTACHMENT A

VITAS HEALTHCARE CORPORATION OF FLORIDA

Officers and Directors

Name and Address

Title

Hugh A. Westbrook
100 S. Biscayne Boulevard, Suite 1500
Miami, Florida 33131

D/C/P/CEO
(Change)

Earl M. Collier, Jr.
100 S. Biscayne Boulevard, Suite 1500
Miami, Florida 33131

D/ExV/CO
(Change)

Esther T. Colliflower
100 S. Biscayne Boulevard, Suite 1500
Miami, Florida 33131

D
(Addition)

J. Richard Williams
100 S. Biscayne Boulevard, Suite 1500
Miami, Florida 33131

D
(Addition)

Mark Ohlendorf
100 S. Biscayne Boulevard, Suite 1500
Miami, Florida 33131

V/T/AS
(Addition)

Mark A. Sterling
100 S. Biscayne Boulevard, Suite 1500
Miami, Florida 33131

S
(Addition)

Kathryn A. Christmann
100 S. Biscayne Boulevard, Suite 1500
Miami, Florida 33131

AS
(Addition)