

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759883

**Entity Name:** HOSPICE OF THE TREASURE COAST, INCORPORATED**Current Principal Place of Business:**5000 DUNN ROAD  
FORT PIERCE, FL 34981**Current Mailing Address:**1201 SE INDIAN ST  
STUART, FL 34997 US**FEI Number:** 59-2199023**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FOX MCCLUSKEY BUSH ROBISON, PLLC  
3461 SE WILLOUGHBY BLVD  
STUART, FL 34994 US*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:** MIKE MCCLUSKEY

01/05/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            CONTROLLER  
Name            MARTELLO, CARL  
Address        2650 SE HAMDEN ROAD  
City-State-Zip: PORT SAINT LUCIE FL 34952

Title            TRUSTEE  
Name            HOFFMAN, SCOTT HARRIS  
Address        12176 RIVERBEND LN  
City-State-Zip: PORT ST LUCIE FL 34984-6426

Title            CFO  
Name            BEVILLE, GLENN  
Address        8054 SONOMA POINTE DRIVE  
City-State-Zip: COLUMBUS GA 31909

Title            TRUSTEE  
Name            CLIFFORD, WILLIAM GEORGE  
Address        5671 SE WINGED FOOT DRIVE  
City-State-Zip: STUART FL 34997-8643

Title            TRUSTEE  
Name            HAISLEY, JIMMIE ANNE  
Address        3015 OKEECHOBEE ROAD  
City-State-Zip: FT PIERCE FL 34947-4616

Title            CHAIRMAN  
Name            BENDER, EWALD WESLEY  
Address        6764 SE PACIFIC DRIVE  
City-State-Zip: STUART FL 34997-8690

Title            PRESIDENT AND CEO  
Name            KENDRICK, JACKIE  
Address        4943 BALD CYPRESS TRAIL  
City-State-Zip: FORT PIERCE FL 34951

Title            TREASURER  
Name            MISHOCK, RICHARD PAUL  
Address        2116 SE HARLOW ST  
City-State-Zip: PORT SAINT LUCIE FL 34952-4990

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** CARL MARTELLO

CONTROLLER

01/05/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name BERGER, PHILIP YORK  
Address 9555 NE 128TH AVE  
City-State-Zip: OKEECHOBEE FL 34972-7104

Title TRUSTEE  
Name FRANK-SCHINTO, MARLENE  
Address 4342 SW DUNDEE CT  
City-State-Zip: PALM CITY FL 34990-4464

Title VC  
Name EMERY, EILEEN MOORE  
Address 91 SOUTHPOINTE DR  
City-State-Zip: FORT PIERCE FL 34949-9134

Title SECRETARY  
Name CULLEY, PETER W  
Address 6252 SE CANTERBURY LN  
City-State-Zip: STUART FL 34997-8672

Title TRUSTEE  
Name SILAS, PATRICK LAWRENCE  
Address 6449 NW HACIENDA LN  
City-State-Zip: PORT ST LUCIE FL 34986-3870

Title TRUSTEE  
Name DECKER, ANN LOUISE  
Address PO BOX 497  
City-State-Zip: JENSEN BEACH FL 34598-0497

Title TRUSTEE  
Name DOODY, JOHN CONCORAN  
Address 6281 SE WINGED FOOT DR  
City-State-Zip: STUART FL 34997-8655

Title TRUSTEE  
Name FRANK, DEIDRE CONRAD  
Address 7817 SE LOBLOLLY DR  
City-State-Zip: HOBE SOUND FL 33455-3832

Title TRUSTEE  
Name FEENAN, JOHN A  
Address 39 NE LOFTING WAY  
City-State-Zip: STUART FL 34996-6513

Title TRUSTEE  
Name LYNCH, RICHARD LEIGH  
Address 603 N INDIAN RIVER DRIVE  
300  
City-State-Zip: FORT PIERCE FL 34950-3057