2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763799

Entity Name: HOSPICE FOUNDATION OF AMERICA, INC.

FILED
Mar 13, 2013
Secretary of State
CC1552510171

Current Principal Place of Business:

1710 RHODE ISLAND AVE, NW SUITE 400 WASHINGTON, DC 20036

Current Mailing Address:

1710 RHODE ISLAND AVE NW SUITE 400 WASHINGTON, DC 20036 US

FEI Number: 59-2219888 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 515 E. PARK AVENUE TALLAHASSEE, FL 32301 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: MARK WILLIAMS 03/13/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

TitleDIRECTORTitleDIRECTORNameABRAMS, DAVIDNameTUCCI, AMY

Address 1435 WEEPING WILLOW WAY Address 1710 RHODE ISLAND AVE, NW SUITE

400

City-State-Zip: HOLLYWOOD FL 33019

City-State-Zip: WASHINGTON DC 20036

Title DIRECTOR

City-State-Zip:

Name PERRY, PRISCILLA Name SPULAK, TI

Address 1627 BRICKELL AVE., #1107

Address 1700 PENNSYLVANIA AVE.

City-State-Zip: MIAMI FL 33129

ry-State-Zip: WASHINGTON DC 20009

Title DIRECTOR Title DIRECTOR

Name SPULAK, PATRICIA Name MACPHERSON, MYRA

Address 5915 WOODLEY RD. Address 2540 MASSACHUSETTS AVE, NW

City-State-Zip: MCLEAN VA 22101 City-State-Zip: WASHINGTON DC 20009

Title DIRECTOR Title DIRECTOR

Name REIFSNYDER, JOANNE Name WASHINGTON, ROBERT

Address P.O. BOX 1483 Address MONTGOMERY HOSPICE, 1355

PICCARD DR. STE. 100

City-State-Zip: ROCKVILLE MD 20850

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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: AMY_TUCCI PRESIDENT 03/13/2013

REHOBOTH BEACH DE 19971

Officer/Director Detail Continued:

TitlePRESIDENTTitleSECRETARYNameTUCCI, AMYNameSPULAK, PATRICIAAddress1710 RHODE ISLAND AVE, NW SUITE 400Address5915 WOODLEY RD.City-State-Zip:WASHINGTON DC 20036City-State-Zip:MCLEAN VA 22101