

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01467

Entity Name: CORNERSTONE HOSPICE & PALLIATIVE CARE, INC.

Current Principal Place of Business:

2445 LANE PARK ROAD
TAVARES, FL 32778-9660

Current Mailing Address:

12470 TELECOM DRIVE, SUITE 301
ATTN: LEGAL DEPT
TEMPLE TERRACE, FL 33637 US

FEI Number: 59-2330114

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLOSKY, ANDREW K
12470 TELECOM DRIVE, SUITE 301
TEMPLE, FL 33637 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, PRESIDENT
Name MOLOSKY, ANDREW K
Address 12470 TELECOM DRIVE, SUITE 301
City-State-Zip: TEMPLE TERRACE FL 33637

Title DIRECTOR
Name HOWELL, MICHAEL DR.
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title CHAIR
Name TERRY, WENDY
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title COO
Name WHITE, RHONDA
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title VICE CHAIR
Name NAGEL, MERIDETH
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title DIRECTOR
Name NAILOS, HEATH
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title DIRECTOR
Name BUCHANAN, TIGE
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title CFO
Name WEBB, TODD
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778

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: CRYSTAL I. BUCCIARELLI, ESQ.

VP LEGAL SERVICES

04/12/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP, LEGAL
Name BUCCIARELLI, CRYSTAL I
Address 12470 TELECOM DRIVE, SUITE 301
ATTN: LEGAL DEPT
City-State-Zip: TEMPLE TERRACE FL 33637

Title CHIEF COMPLIANCE OFFICER
Name ZOLMAN, VALERIE
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title DIRECTOR
Name KAMUS, TONY
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title VP
Name D'AURIA, JASON
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title CHIEF INFORMATION OFFICER
Name STROBEL, SHERI
Address 12470 TELECOM DRIVE, SUITE 301
City-State-Zip: TEMPLE TERRACE FL 33637

Title ASST. SECRETARY
Name DAVIS, CYNDI
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title PARALEGAL
Name HILEY, ANNE MARIE
Address 12470 TELECOM DRIVE, SUITE 301
ATTN: LEGAL DEPT
City-State-Zip: TEMPLE TERRACE FL 33637

Title DIRECTOR
Name CHASE, THOMAS
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title CHIEF MEDICAL OFFICER
Name FRIEDMAN, TARA MD
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title CHIEF PEOPLE OFFICER
Name ROMENCE, NICOLE
Address 2445 LANE PARK ROAD
City-State-Zip: TAVARES FL 32778-9660

Title CHIEF DEVELOPMENT OFFICER
Name STANFIELD, ADAM
Address 12470 TELECOM DRIVE, SUITE 301
City-State-Zip: TEMPLE TERRACE FL 33637