2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007648

Entity Name: LIFEPATH HOSPICE, INC.

Current Principal Place of Business:

4200 WEST CYPRESS STREET

SUITE 690 TAMPA, FL 33607

Current Mailing Address:

12470 TELECOM DRIVE SUITE 300 WEST

TEMPLE TERRACE, FL 33637 US

FEI Number: 20-5276870 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLOSKY, ANDREW K.

12470 TELECOM DRIVE - SUITE 300 WEST

TEMPLE TERRACE, 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: ANDREW K. MOLOSKY 06/16/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

Name

Address

City-State-Zip:

Title DIRECTOR, CHAIR, PRESIDENT/CEO Title DIRECTOR, SECRETARY

Name MOLOSKY, ANDREW K. Name GODDARD, VALERIE H.

Address 12470 TELECOM DRIVE Address 4200 WEST CYPRESS STREET

SUITE 300 WEST SUITE 690

City-State-Zip: TEMPLE TERRACE FL 33637 City-State-Zip: TAMPA FL 33607

Title DIRECTOR, CFO Title DIRECTOR, CHIEF MEDICAL OFFICER

Name O'NEIL, DAVID J. Name SCHONWETTER, RONALD S. DR.

Address 12470 TELECOM DRIVE Address 12470 TELECOM DRIVE

SUITE 300 WEST SUITE 300 WEST

City-State-Zip: TEMPLE TERRACE FL 33637 City-State-Zip: TEMPLE TERRACE FL 33637

 Title
 DIRECTOR
 Title
 ASST. SECRETARY

 Name
 SMILEY, MONICA R.
 Name
 EATON, GAYLE E.

Address 4200 WEST CYPRESS STREET Address 12470 TELECOM DRIVE

SUITE 690 SUITE 300 WEST

City-State-Zip: TAMPA FL 33607 City-State-Zip: TEMPLE TERRACE FL 33637

Title DIRECTOR Title EX OFFICIO/NON-VOTING DIRECTOR.

MCMILLAN, SUSAN C. CHIEF COMPLIANCE OFFICER

Name SAUCIER, S. PAMELA 4200 WEST CYPRESS STREET

SUITE 690 Address 12470 TELECOM DRIVE

TAMPA FL 33607 SUITE 300 WEST

City-State-Zip: TEMPLE TERRACE FL 33637

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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: DAVID J. O'NEIL CFO 06/16/2020

FILED Jun 16, 2020

Secretary of State

3731010859CC

Date

Officer/Director Detail Continued:

Title DIRECTOR, VICE CHAIR
Name REARDON, MARY BETH

Address 4200 WEST CYPRESS STREET

SUITE 690

City-State-Zip: TAMPA FL 33607

Title EX OFFICIO NON-VOTING DIRECTOR, CLINICAL

ADMINISTRATOR

Name BURROUGHS, BRENDA MARTIN
Address 4200 WEST CYPRESS STREET

SUITE 690

City-State-Zip: TAMPA FL 33607

Title EX OFFICIO/NON-VOTING DIRECTOR,

EXECUTIVE DIRECTOR

Name STRIED, MELODY

Address 4200 WEST CYPRESS STREET

SUITE 690

City-State-Zip: TAMPA FL 33607

Title DIRECTOR

Name MARTIN, GAYLE SIERENS

Address 4200 WEST CYPRESS STREET

SUITE 690

City-State-Zip: TAMPA FL 33607

Title VP, INTEGRATION & OPTIMIZATION

Name BACON, CHASE

Address 12470 TELECOM DRIVE

SUITE 300 WEST

City-State-Zip: TEMPLE TERRACE FL 33637

Title DIRECTOR

Name LAMBERT, RONETTA

Address 4200 WEST CYPRESS STREET

SUITE 690

City-State-Zip: TAMPA FL 33607

Title EX OFFICIO, NON-VOTING

DIRECTOR, MEDICAL DIRECTOR

Name WALKER, ROBERT DR.

Address 4200 WEST CYPRESS STREET

SUITE 690

City-State-Zip: TAMPA FL 33607

Title CHIEF INFORMATION OFFICER

Name SYPEK, SHERYL J.

Address 12470 TELECOM DRIVE

SUITE 300 WEST

City-State-Zip: TEMPLE TERRACE FL 33637

Title DIRECTOR, COO

Name FORMAN, DEAN

Address 12470 TELECOM DRIVE

SUITE 300 WEST

City-State-Zip: TEMPLE TERRACE FL 33637

Title DIRECTOR

Name FOGARTY, JERRY E.

Address 4200 WEST CYPRESS STREET

SUITE 690

City-State-Zip: TAMPA FL 33607

Title VP, DEVELOPMENT & EXECUTIVE

DIRECTOR, FOUNDATION

Name STANFIELD, ADAM

Address 12470 TELECOM DRIVE

SUITE 300 WEST

City-State-Zip: TEMPLE TERRACE FL 33637