#### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007799

Entity Name: GOOD SHEPHERD HOSPICE, INC.

FILED
Apr 15, 2013
Secretary of State
CC6028383331

## **Current Principal Place of Business:**

320 W. MAIN STREET LAKELAND. FL 33815

## **Current Mailing Address:**

12470 TELECOM DRIVE - SUITE 300 WEST TEMPLE TERRACE, FL 33637

FEI Number: 20-5276923 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

FERNANDEZ, KATHY L 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:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

WEST

Title DIRECTOR, CHAIRMAN, PRESIDENT Title DIRECTOR, VC Name FERNANDEZ, KATHY L. Name YENTES, REX R.

Address 12470 TELECOM DRIVE - SUITE 300 Address 12470 TELECOM DRIVE - SUITE 300

WES

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

Title DIRECTOR, SECRETARY Title D

NameWEGMAN, PHILLIP D.NameBARNHART, JOHN T.Address320 W. MAIN STREETAddress320 W. MAIN STREETCity-State-Zip:LAKELAND FL 33815City-State-Zip:LAKELAND FL 33815

TitleDIRECTORTitleDIRECTORNameHANCOCK, JANE E. ESQ.NameHINTON, BRIAN

Address 320 W. MAIN STREET Address 12470 TELECOM DRIVE - SUITE 300

WEST

City-State-Zip: LAKELAND FL 33815 City-State-Zip: TEMPLE TERRACE FL 33637

Title DIRECTOR Title DIRECTOR

Name JOINER, JAMES T. ESQ. Name PIOTROWSKI, STANLEY L.

Address 12470 TELECOM DRIVE - SUITE 300

Address 12470 TELECOM DRIVE - SUITE 300

WEST Address 12470 WEST

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

# 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: DARRELL WHITE, ESQ. CHIEF LEGAL OFFICER 04/15/2013

Electronic Signature of Signing Officer/Director Detail

Date

### Officer/Director Detail Continued:

O'NEIL, DAVID J.

Name

DIRECTOR Title Title DIRECTOR, COO WALKER, PHILLIP E. LUTTON, ANDREW E. Name Name

Address 320 W. MAIN STREET Address 12470 TELECOM DRIVE - SUITE 300 WEST

City-State-Zip: LAKELAND FL 33815 City-State-Zip:

TEMPLE TERRACE FL 33637 Title DIRECTOR, CFO Title DIRECTOR, CHIEF MEDICAL OFFICER

SCHONWETTER, RONALD S. M.D. Name Address 12470 TELECOM DRIVE - SUITE 300 WEST Address 12470 TELECOM DRIVE - SUITE 300

City-State-Zip: TEMPLE TERRACE FL 33637 WEST

TEMPLE TERRACE FL 33637 City-State-Zip: Title DIRECTOR, EXEC. DIR.

Title DIRECTOR, CCCO EVANS, DONALD D. Name Name MADILL, PEGGY M. Address 320 W. MAIN STREET

Address 12470 TELECOM DRIVE - SUITE 300 City-State-Zip: LAKELAND FL 33815 WEST

TEMPLE TERRACE FL 33637 City-State-Zip: Title DIRECTOR, CHIEF LEGAL OFFICER

WHITE, DARRELL ESQ. Name Title ASST. SECRETARY Address 12470 TELECOM DRIVE - SUITE 300 WEST Name EATON, GAYLE E.

City-State-Zip: TEMPLE TERRACE FL 33637 12470 TELECOM DRIVE - SUITE 300 Address

WEST

City-State-Zip: TEMPLE TERRACE FL 33637