

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 17, 2015
Secretary of State
CC0391674228

Entity Name: GOOD SHEPHERD HOSPICE, INC.

Current Principal Place of Business:

3470 LAKELAND HILLS BLVD.
LAKELAND, FL 33805

Current Mailing Address:

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

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 :

Title DIRECTOR, CHAIR, PRESIDENT/CEO
Name FERNANDEZ, KATHY L.
Address 3470 LAKELAND HILLS BLVD.
City-State-Zip: LAKELAND FL 33805

Title DIRECTOR, VICE CHAIR
Name JOINER, JAMES T.
Address 1128 FIRST STREET, SOUTH
City-State-Zip: WINTER HAVEN FL 33880

Title DIRECTOR, SECRETARY
Name WEGMAN, PHILIP D.
Address 625 EAST ORANGE STREET
City-State-Zip: LAKELAND FL 33801

Title DIRECTOR, COO
Name BERTELS, PEGGY I.
Address 3470 LAKELAND HILLS BLVD.
City-State-Zip: LAKELAND FL 33805

Title DIRECTOR
Name HANCOCK, JANE M.
Address 13 E. MAIN STREET
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name HESTON, MICHELLE D.
Address 600 WEST COLLEGE DRIVE
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name HINTON, BRIAN
Address 2310 S. KISSINGEN AVE.
City-State-Zip: BARTOW FL 33830

Title DIRECTOR
Name HOGAN, WILLIE M. REV.
Address 920 WEST 13TH STREET
City-State-Zip: LAKELAND FL 33805

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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: H. DARRELL WHITE, ESQ.

CHIEF LEGAL OFFICER

04/17/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, CFO
Name O'NEIL, DAVID J.
Address 3470 LAKE LAND HILLS BLVD.
City-State-Zip: LAKE LAND FL 33805

Title DIRECTOR, CHIEF MEDICAL OFFICER
Name SCHONWETTER, RONALD S.
Address 3470 LAKE LAND HILLS BLVD.
City-State-Zip: LAKE LAND FL 33805

Title EX OFFICIO/NON-VOTING DIRECTOR, MEDICAL DIRECTOR
Name HALL, KENDRA S. DR.
Address 3470 LAKE LAND HILLS BLVD.
City-State-Zip: LAKE LAND FL 33805

Title EX OFFICIO/NON-VOTING DIRECTOR, CHIEF LEGAL OFFICER
Name WHITE, H. DARRELL ESQ.
Address 12470 TELECOM DRIVE SUITE 300 WEST
City-State-Zip: TEMPLE TERRACE FL 33637

Title DIRECTOR
Name SANTIAGO, MARTHA R.
Address 999 AVENUE H, NE
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR
Name WALKER, PHILLIP E.
Address 3119 US HWY. 98 N.
City-State-Zip: LAKE LAND FL 33805

Title EX OFFICIO/NON-VOTING DIRECTOR, EXECUTIVE DIRECTOR
Name ROA, JAYSEN F.
Address 3470 LAKE LAND HILLS BLVD.
City-State-Zip: LAKE LAND FL 33805

Title ASST. SECRETARY
Name EATON, GAYLE E.
Address 12470 TELECOM DRIVE SUITE 300 WEST
City-State-Zip: TEMPLE TERRACE FL 33637