

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N23168

**Entity Name:** THE HOSPICE FOUNDATION OF MARTIN & ST. LUCIE, INC.

**Current Principal Place of Business:**

1201 SE INDIAN STREET  
STUART, FL 34997

**Current Mailing Address:**

1201 SE INDIAN STREET  
STUART, FL 34997 US

**FEI Number:** 65-0047497

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

FOX, M. LANNING  
3473 SE WILLOUGHBY BLVD.  
STUART, FL 34994 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 TRUSTEE  
Name JOHNSON, BONNEY  
Address 819 SOUTH FEDERAL HIGHWAY  
City-State-Zip: STUART FL 34994

Title PRESIDENT & CEO  
Name DE CUBA, SUSAN R  
Address 105 HILLCREST COURT  
City-State-Zip: STUART FL 34996

Title CONTROLLER  
Name MARTELLO, CARL  
Address 2650 SE HAMDEN ROAD  
City-State-Zip: PORT ST. LUCIE FL 34952

Title SECRETARY/TREASURER  
Name BOYLE, RICHARD  
Address 13412 WAX MYRTLE TRAIL  
City-State-Zip: PALM CITY FL 34990

Title VP OF COMPLIANCE  
Name BERGSTROM, LEIGH  
Address 300 HARBOUR DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title TRUSTEE  
Name BARNARD, STEPHANIE  
Address 1524 BUTTONBUSH CIRCLE  
City-State-Zip: PALM CITY FL 34990

Title TRUSTEE  
Name CRANDALL, WILLIAM BEARD  
Address 12782 NW MARINER CT  
City-State-Zip: PALM CITY FL 34990

Title VC  
Name DOODY, JOHN CORCORAN  
Address 6281 WINGED FOOT DRIVE  
City-State-Zip: STUART FL 34997

**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:** CARL MARTELLO

**CONTROLLER**

**08/03/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title CHAIRMAN  
Name FIELDS, JORDAN IRA  
Address 416 SE CORTEZ AVENUE  
City-State-Zip: STUART FL 34994

Title TRUSTEE  
Name MAYES, ROY EDWARD  
Address 6881 SE NORTH MARINA WAY  
City-State-Zip: STUART FL 34996

Title TRUSTEE  
Name BENDER, EWALD  
Address 6764 SE PACIFIC DRIVE  
City-State-Zip: STUART FL 34997

Title TRUSTEE  
Name EMERY, EILEEN  
Address 91 SOUTHPOINTE DRIVE  
City-State-Zip: FT. PIERCE FL 34949

Title VP  
Name FOURINE, KENNETH MURRAY  
Address 244 NEW HAVEN BLVD  
City-State-Zip: JUPITER FL 33458

Title TRUSTEE  
Name FRANK, DEIDRE  
Address 7817 SE LOBIOLLY BAY DR  
City-State-Zip: HOBE SOUND FL 33455-3832

Title TRUSTEE  
Name HOFFMAN, SCOTT HARRIS  
Address 4586 SW LONG BAY DRIVE  
City-State-Zip: PALM CITY FL 34990

Title TRUSTEE  
Name WITSELL, FREDERICK CHAPLIN  
Address 7029 SE GOLFHOUSE DRIVE  
City-State-Zip: HOBE SOUND FL 33455

Title TRUSTEE  
Name LYNCH, RICHARD  
Address 603 NORTH INDIAN RIVER DRIVE  
STE 300  
City-State-Zip: FT. PIERCE FL 34950

Title TRUSTEE  
Name BARLETTA, TONY  
Address 1728 SE INDIAN STREET  
City-State-Zip: STUART FL 34997

Title MAJOR GIFT OFFICER  
Name GUTHRIE, VALERIE  
Address 1863 SW SPRINGFIELD CT  
City-State-Zip: PALM CITY FL 34990