

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23168

FILED
Jan 06, 2015
Secretary of State
CC9372998016

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 CO-TRUSTEE
Name MOORE, WILLIAM
Address 673 SW WHISPERING PALM LANE
City-State-Zip: PALM CITY FL 34990

Title CO-TRUSTEE
Name BRASKAMP, JODY JSR.
Address 1719 BUTTONBUSH CIRCLE
City-State-Zip: PALM CITY FL 34990

Title CO-TRUSTEE
Name JOHNSON, BONNEY
Address 819 SOUTH FEDERAL HIGHWAY
City-State-Zip: STUART FL 34994

Title CO-TRUSTEE
Name VON ALDENBRUCK, GYTHA
Address 8900 S. OCEAN DRIVE
City-State-Zip: JENSEN BEACH FL 34957

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

Title VP & CHIEF PHILANTHROPY OFFICER
Name ALLEN, DOROTHY
Address 981 WILDWOOD DRIVE
City-State-Zip: MELBOURNE FL 32940

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

Title CHAIRMAN
Name PIERSON, JAMES
Address 1216 NW WINTERS CREEK ROAD
City-State-Zip: PALM CITY FL 34990

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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: CARL MARTELLO

CONTROLLER

01/06/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title CFO
Name RUGGLES, CAROL
Address 800 NW PEACOCK BLVD
City-State-Zip: PORT ST LUCIE FL 34986

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