

2024 FLORIDA NOT FOR PROFIT CORPORATION 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 MCCLUSKEY BUSH ROBISON
3461 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: MIKE MCCLUSKEY

01/05/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title TRUSTEE
Name FIELDS, JORDAN IRA
Address 27 NE ALICE ST
City-State-Zip: JENSEN BEACH FL 34957-6013

Title VP
Name FOURINE, KENNETH MURRAY
Address 17975 APRIL LANE
City-State-Zip: JUPITER FL 33458

Title TRUSTEE
Name GRAVES, GLENN MAURICE
Address 174 BENT TREE DR
City-State-Zip: PALM BEACH GARDENS FL 33418-3597

Title TRUSTEE
Name MAYES, CHERYL A
Address 80 S RIVER ROAD
City-State-Zip: STUART FL 34996-6429

Title DIRECTOR
Name BIRKETT, CHRISTINE
Address 1704 SW 32ND TERRACE
City-State-Zip: PALM CITY FL 34990

Title TREASURER
Name JACOBS, MELINDA MILKA
Address 385 LIVE OAK DRIVE
City-State-Zip: VERO BEACH FL 32963-9748

Title CFO
Name BEVILLE, GLENN
Address 8054 SONOMA POINTE DRIVE
City-State-Zip: COLUMBUS GA 31909

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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

01/05/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SENIOR DEVELOPMENT OFFICER
Name PALMER, AGNES
Address 1030 SW ESTAUGH AVE
City-State-Zip: PORT ST LUCIE FL 34953

Title VC
Name MISHOCK, RICHARD PAUL
Address 2116 SE HARLOW STREET
City-State-Zip: PORT SAINT LUCIE FL 34952-4990

Title SECRETARY
Name DREYER, DEREK WILLIAM
Address 1293 NW RIVER TERRACE
City-State-Zip: STUART FL 34994-7625

Title CHAIRMAN
Name DOODY, JOHN CONCORAN
Address 6281 SE WINGED FOOT DR
City-State-Zip: STUART FL 34997-8655

Title TRUSTEE
Name NGO, STEPHEN PAUL
Address 1320 SW PINWOOD CT
City-State-Zip: PALM CITY FL 34990-1332

Title TRUSTEE
Name BENDER, EWALD WESLEY
Address 6764 SE PACIFIC DR
City-State-Zip: STUART FL 34997-8690

Title TRUSTEE
Name KAUFMAN, CHRISTINE ELIZABETH
Address 1491 NW WILD OLIVE CT
City-State-Zip: PALM CUTY FL 34990-8072

Title PRESIDENT AND CEO
Name KENDRICK, JACKIE
Address 4943 BALD CYPRESS TRAIL
City-State-Zip: FORT PIERCE FL 34951

Title TRUSTEE
Name CARMODY, MARTIN JOHN
Address 4173 SE FAIRWAY E
City-State-Zip: STUART FL 34997-6149

Title TRUSTEE
Name GRAZIANO, ANNE DYSART
Address 5655 SE FOXCROSS PL
City-State-Zip: STUART FL 34997-8044

Title TRUSTEE
Name LAZARUS, MICHAEL LEE
Address 1160 SW CHAPMAN WAY
205
City-State-Zip: PALM CITY FL 34990-2431

Title TRUSTEE
Name JOHNSON, BONNEY A
Address 5470 NW MODEL CT
City-State-Zip: PORT ST LUCIE FL 34986-4016

Title TRUSTEE
Name GOULD, JAMES SPEER PURNELL
Address 3055 NW RADCLIFFE WAY
City-State-Zip: PALM CITY FL 34990-4908

Title MANAGER
Name OLSON, MARK
Address 8327 MULLIGAN CIRCLE
City-State-Zip: PORT ST LUCIE FL 34986