

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27921

Entity Name: CORNERSTONE HOSPICE FOUNDATION, INC.

Current Principal Place of Business:

2445 LANE PARK ROAD
TAVARES, FL 32778-6660

Current Mailing Address:

2445 LANE PARK ROAD
TAVARES, FL 32778-6660

FEI Number: 59-2915060

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUCHHOLZ, NICK
2445 LANE PARK ROAD
TAVARES, FL 32778 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 CHAIRMAN
Name NAGEL, MERIDETH
Address 1201 W. HWY 50
City-State-Zip: CLERMONT FL 34711

Title VC
Name TALLMAN, ANN
Address 2285 PARR DR.
City-State-Zip: THE VILLAGES FL 32162

Title TREASURER
Name KEIBER, SCOTT
Address 15701 HWY 50, SUITE 204
City-State-Zip: CLERMONT FL 34711

Title SECRETARY
Name GERKEN, SCOTT
Address 4850 N. HWY 19A
City-State-Zip: MOUNT DORA FL 32757

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: MERIDETH NAGEL

CHAIRMAN

01/19/2017

Electronic Signature of Signing Officer/Director Detail

Date