2016 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 26, 2016
Secretary of State
CC7253099007

DOCUMENT# P08000094307

Entity Name: COMPASSIONATE CARE HOSPICE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2525 DRANE FIELD ROAD
SUITE 4
LAKELAND, FL 33811

Current Mailing Address:

200 LANIDEX PLAZA
SUITE 2101
PARSIPPANY, NJ 07054 US

FEI Number: 26-3668452

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMPASSIONATE CARE HOSPICE
2525 DRANE FIELD ROAD
SUITE 4
LAKELAND, FL 33811 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: JUDITH GREY 08/26/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEO	Title	CHAIRMAN, PRESIDENT
Name	GREY, JUDITH I	Name	HECHING, MILTON
Address	200 LANIDEX PLAZA SUITE 2101	Address	5420 LAGORCE DRIVE
City-State-Zip:	PARSIPPANY NJ 07054	City-State-Zip:	MIAMI BEACH FL 33140

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JUDITH GREY CEO 08/26/2016

Electronic Signature of Signing Officer/Director Detail — Date