

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002722

Entity Name: COMPASSIONATE CARE HOSPICE FOUNDATION,
INCORPORATED

Current Principal Place of Business:

11 INDEPENDENCE WAY
NEWARK, DE 19713

Current Mailing Address:

11 INDEPENDENCE WAY
NEWARK, DE 19713

FEI Number: 20-1035181

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZAPPO, ROZIE
2393 E.F. GRIFFIN RD.
BARTOW, FL 33830 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 P
Name GREY, JUDITH
Address 7 DEER RUN
City-State-Zip: ROCKAWAY NJ 97866

Title V
Name HORNUNG, THOMAS J
Address 900 PHILADELPHIA PIKE
City-State-Zip: WILMINGTON DE 19809

Title TREA
Name HEILAND, PATRICIA A
Address 1513 CEDAR CLIFF DR., SUITE 100
City-State-Zip: CAMP HILL PA 17011

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: JUDITH GREY

BOARD PRESIDENT

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date