2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0000001464

Entity Name: VITAS HME SOLUTIONS, INC.

Current Principal Place of Business:

201 S BISCAYNE BLVD SUITE 400 MIAMI, FL 33131 FILED
Mar 25, 2021
Secretary of State
0318536257CC

Current Mailing Address:

255 E FIFTH STREET SUITE 1050

CINCINNATI, OH 45202 US

FEI Number: 65-0989593 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

SUITE 400

MIAMI FL 33131

CINCINNATI OH 45202

Title PRESIDENT, CEO Title VP

NameWESTFALL, NICHOLASNameWILLIAMS, DAVID PAddress201 SOUTH BISCAYNE BLVDAddress255 E FIFTH STREET

SUITE 2600

CINCINNATI OH 45202

CINCINNATI OH 45202

City-State-Zip:

City-State-Zip:

City-State-Zip: MIAMI FL 33131 City-State-Zip: CINCINNATI OH 45202

Title EVP/CFO Title AT

Name KREGER, JEFFREY M Name MANGINE, ROBERT E JR.

Address 201 S BISCAYNE BLVD Address 255 E FIFTH STREET

SUITE 400 SUITE 2600

Title SGC Title D

Name JUDKINS, BRIAN C Name MCNAMARA, KEVIN J

Address 255 E. 5TH STREET, Address 255 E FIFTH ST

SUITE 2600 SUITE 2600

Title AVP IT SYSTEMS

Name ANDERSEN, MATT
Address 201 S BISCAYNE BLVD

Address 2013 DISCATINE DLVD

SUITE 400

City-State-Zip: MIAMI FL 33131

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: NICHOLAS M. WESTFALL P/CEO 03/25/2021