## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006438

**Entity Name: CHEMED CORPORATION** 

**Current Principal Place of Business:** 

255 EAST FIFTH STREET SUITE 2600

CINCINNATI, OH 45202

FILED Apr 07, 2017 Secretary of State CC3212673281

## **Current Mailing Address:**

255 EAST FIFTH STREET SUITE 2600-B. S. GUGEL CINCINNATI, OH 45202

FEI Number: 31-0791746 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

Officer/Director Detail:

Title PCEO, DIRECTOR Title CFOEVP

Name MCNAMARA, KEVIN J Name WILLIAMS, DAVID P

Address 255 EAST FIFTH STREET, SUITE 2600 Address 255 EAST FIFTH STREET, SUITE 2600

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: CINCINNATI OH 45202

Title EVP Title EVP

Name LEE, SPENCER S Name WESTFALL, NICHOLAS M.

Address 255 EAST FIFTH STREET, SUITE 2500 Address 255 EAST FIFTH STREET, SUITE 2600

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: CINCINNATI OH 45202

Title AT Title CHAIRMAN OF THE BOARD

Name STEPHENS, MARK W Name WALSH, GEORGE J. III

Address 255 EAST 5TH STREET, SUITE 2600 Address ONE CHASE MANHATTAN PLAZA

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: NEW YORK NY 10005

Title VP, SEC & CHIEF LEGAL OFFICER Title VP, CAO

Name DALLOB, NAOMI C. Name REINHARD, LISA A.

Address 255 EAST FIFTH STREET Address 255 EAST FIFTH STREET

SUITE 2600 SUITE 2600

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: CINCINNATI OH 45202

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

SIGNATURE: MARK W. STEPHENS ASSISTANT TREASURER 04/07/2017

Electronic Signature of Signing Officer/Director Detail

Date

Date

## Officer/Director Detail Continued:

Title VP, DIRECTOR

Name HUTTON, THOMAS C.

Address ONE ROCKEFELLER PLAZA

**SUITE 1510** 

City-State-Zip: NEW YORK NY 10020

Title VP, ASST CONTROLLER

Name WITZEMAN, MICHAEL

Address 255 EAST FIFTH STREET

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title ASST CONTROLLER
Name VOLKER, LAURA A.

Address 255 EAST FIFTH STREET

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title ASST CONTROLLER Name EATON, JAMES E.

Address 255 EAST FIFTH STREET

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title ASST. SECRETARY

Name FIECHTNER, MARIAN E.

Address 255 EAST FIFTH STREET

SUITE 2600

City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR

Name GEMUNDER, JOEL F.
Address 5910 SENTINEL RIDGE
City-State-Zip: CINCINNATI OH 45243

Title DIRECTOR

Name KREBS, WALTER L.
Address 2495 LEGENDS WAY

City-State-Zip: CRESTVIEW HILLS KY 41017

Title DIRECTOR

Name PRICE, THOMAS P.

Address 255 E 5TH ST

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR

Name WOOD, FRANK E.

Address 3 PINEHURST LANE

City-State-Zip: CINCINNATI OH 45208

Title VP

Name REILLY, THOMAS J.

Address 255 EAST FIFTH STREET

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title ASST VP

Name PAINTER, JACK W.

Address 255 EAST FIFTH STREET

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title ASST CONTROLLER
Name SCHMIDT, HOLLEY R.

Address 255 EAST FIFTH STREET

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title ASST. SECRETARY
Name WARNER, SHERRI L.

Address 255 EAST FIFTH STREET

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title ASST. SECRETARY
Name ROBERTS, PENNIE L.

Address 255 EAST FIFTH STREET

**SUITE 2600** 

City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR

Name GRACE, PATRICK P.

Address 1100 PARK AVENUE

City-State-Zip: NEW YORK NY 10128

Title DIRECTOR

Name LINDELL, ANDREA R.

Address 255 E 5TH ST SUITE 2600

SUITE 200

City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR

Name SAUNDERS, DONALD E.

Address 255 E 5TH ST

SUITE 2600

City-State-Zip: CINCINNATI OH 45202