

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764980

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: VNA HOSPICE OF INDIAN RIVER COUNTY, INC.

**Current Principal Place of Business:**

1110 35TH LANE  
VERO BEACH, FL 329603514

**New Principal Place of Business:**

1110 35TH LANE  
VERO BEACH, FL 32960

**Current Mailing Address:**

1110 35TH LANE  
VERO BEACH, FL 329603514

**New Mailing Address:**

1110 35TH LANE  
VERO BEACH, FL 32960

FEI Number: 59-2402136

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BROOME, SHARON K.  
1110 35TH LANE  
VERO BEACH, FL 32960 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: LEWIS, HAL  
Address: 565 E FOREST TRAIL  
City-St-Zip: VERO BEACH, FL 32962

Title: VD ( ) Delete  
Name: BAILEY, SUSAN  
Address: 941 SANDFLY LANE  
City-St-Zip: VERO BEACH, FL 32963

Title: PCEO ( ) Delete  
Name: BROOME, SHARON K  
Address: 1110 35TH LANE  
City-St-Zip: VERO BEACH, FL 32960

Title: SD ( ) Delete  
Name: CROOM, SUSAN  
Address: 220 SEABREEZE COURT  
City-St-Zip: ORCHID, FL 32963

Title: TD ( ) Delete  
Name: SMITH, ELIZABETH  
Address: 130 PEPPERTREE DRIVE  
City-St-Zip: VERO BEACH, FL 32963

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD (X) Change ( ) Addition  
Name: BAILEY, SUSAN  
Address: 941 SANDFLY LANE  
City-St-Zip: VERO BEACH, FL 32963

Title: VD (X) Change ( ) Addition  
Name: SMITH, ELIZABETH  
Address: 130 PEPPERTREE DRIVE  
City-St-Zip: VERO BEACH, FL 32963

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: CHASE, PETER  
Address: 8855 W ORCHID ISLAND CIRCLE  
City-St-Zip: VERO BEACH, FL 32963

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHARON K BROOME

PCEO

04/25/2008

Electronic Signature of Signing Officer or Director

Date