

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90197 012 ****61.25

DOCUMENT # 764980

1. Entity Name

VNA HOSPICE OF INDIAN RIVER COUNTY, INC.



Principal Place of Business

**1111 36TH STREET
VERO BEACH FL 32960-3514**

Mailing Address

**1111 36TH STREET
VERO BEACH FL 32960-3514**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2402136**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BROOME, SHARON K.
1111 - 36TH STREET
VERO BEACH FL 32960**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Sharon K. Broome PRES/CEO

(NOTE: Registered Agent signature required when reinstating)

DATE

3/3/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD KANAREK, CAROL 1241 POITRAS DR VERO BEACH FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CALDWELL, JUDY 620 INDIAN HARBOUR ROAD VERO BEACH FL 32963	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ST CLAIR, JIM 2074 OCEAN RIDGE CIRCLE VERO BEACH FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO BROOME, SHARON K 1111 36TH ST VERO BCH. FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD UMLAND, PENNY 2046 WINDWARD WY VERO BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD McKinney, Brigitte 4810 Bethel Creek Dr #1 Vero Beach FL 32963	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Rogue, Louis Dr. 1950 41st Ave, Ste D Vero Beach FL 32960	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Rhodes, Seth Dr 616 Fox Run SW Vero Beach FL 32962	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sharon K. Broome SHARON K. BROOME 3/3/03 772-978-5577

CR2E037 (10/02)