

	•	TRANSMITTA	AL LETTER	
TO:	Qualification Division of C	Registration Section orporations		
SU	BJECT:	WIREGRASS HOSPICE, INC.		
		(Name of Cor		· -
	Sir or Madam: nclosed "Applic	cation by Foreign Not for Pro		003150344
its Afi	fairs in Florida" nced not for pro	, "Certificate of Existence", of the corporation to conducts in espondence concerning this n	and check are submitted to ts affairs in Florida.	register the above
		J. Vincent Edge, Esq. (Name of P	S	,
	FAR	MER, PRICE, HORNSBY & WEATHER (Firm/Com	FORD, L.L.P.	
		Post Office Drawer 222	ю	
		(Address		
		Dothan, Alabama 36302		•
For fu	rther informatic	(City, State and on concerning this matter, ple	Zip Code)	FIL 00 FEB 28
Vince	e Edge	at (3	34 ₎ 793 <u> </u>	24 II B D
	ame of Person)	a. (Area Code & Daytime Telep	phone Number
Qualifi Divisio 409 E. Tallaha	ET ADDRESS ication/Tax Lies on of Corporation Gaines St. assee, FL 3239	n Section ons	MAILING ADDRESS: Qualification/Tax Lien S Division of Corporation P. O. Box 6327 Tallahassee, FL 32314	Section
Enclos	ed is a check fo	or the following amount:		/
□ \$70	.00 Filing Fee	☐ \$78.75 Filing Fee & ☐ Certificate of Status	J \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(Name of corporation: must include the wor	rd "INCORPORATED" or "CORPORATION" or words or
abbreviations of like import in language as	will clearly indicate that it is a corporation instead of a natural the name at present. "Company" or "Co." may not be used as a
corporate suffix by a nonprofit corporation.	.)
	(0.10000#/
. Alabama	3. 63-1038254
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
• ,	_
December 18, 1990	5. Perpetual
(Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
March 1, 2000	<u> </u>
(Date corporation first conducted Aff See sections 617.1501, 617.1502, and	airs in Florida - d 817.155, F.S.)
2740 Old Headland Avenue	
Dothan, Alabama 36303	
	nailing address)
	nailing address)
(Current m	
(Current m Own and operate Hospice for the can	re of terminally ill patients.
(Current m Own and operate Hospice for the can	
(Current m Own and operate Hospice for the can (Purpose(s) of corporation authorized in hon	re of terminally ill patients. me state or country to be carried out in the state of Florida)
(Current m Own and operate Hospice for the can (Purpose(s) of corporation authorized in hon	re of terminally ill patients. me state or country to be carried out in the state of Florida)
Own and operate Hospice for the car (Purpose(s) of corporation authorized in hon Name and street address of Florid	re of terminally ill patients. me state or country to be carried out in the state of Florida)
(Current m Own and operate Hospice for the can (Purpose(s) of corporation authorized in hon	re of terminally ill patients. me state or country to be carried out in the state of Florida)
Own and operate Hospice for the car (Purpose(s) of corporation authorized in hon Name and street address of Florid	re of terminally ill patients. me state or country to be carried out in the state of Florida) la registered agent:
Own and operate Hospice for the car (Purpose(s) of corporation authorized in hon Name and street address of Florid Sue Nelson	re of terminally ill patients. me state or country to be carried out in the state of Florida) la registered agent:
Own and operate Hospice for the car (Purpose(s) of corporation authorized in hon Name and street address of Florid	re of terminally ill patients. me state or country to be carried out in the state of Florida) la registered agent: (Name) (Name)
Own and operate Hospice for the car (Purpose(s) of corporation authorized in hon Name and street address of Florid Sue Nelson	re of terminally ill patients. me state or country to be carried out in the state of Florida) la registered agent: (Name) (Name) (Office address)
Own and operate Hospice for the car (Purpose(s) of corporation authorized in hon Name and street address of Florid Sue Nelson	re of terminally ill patients. me state or country to be carried out in the state of Florida) la registered agent: (Name) (Name)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: John Edge	
Address: 2740 Old Headland Avenue	
Dothan, Alabama 36303	
Vice Chairman: Paul Adams	_
Address: 2740 Old Headland Avenue	
Dothan, Alabama 36303	
Director: Mary Julia Lee; Barry Sowell; John Dunn	
Address: 2740 Old Headland Avenue	_
Dothan, Alabama 36303	
Director: Eddie McKenzie; and Cindy Whiddon	
Address: 2740 Old Headland Avenue	
Dothan, Alabama 36303	
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	
President: Ray Shrout	
Address: 2740 Old Headland Avenue	
Dothan, Alabama 36303	
Vice President: Cathy Segelman	
Address: 2740 Old Headland Avenue	Tì
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Secretary: Diane Cowley	ز
Address: 2740 Old Headland Avenue, Dothan, Alabama 36303	-
Treasurer: Paul Richardson	
Address: 2740 Old Headland Avenue, Dothan, Alabama 36303	_
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. (Signature of Chalrman, Vice Chairman, or any officer listed in number 12 of the application)	
Ray Shrout, President (Typed or printed name and capacity of person signing application)	

STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Wiregrass Hospice, Inc. incorporated in Houston County, Dothan, Alabama on December 18, 1990. I further certify that the records do not disclose that said Wiregrass Hospice, Inc. has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

December 10, 1999

Date

Die Bennen

Jim Bennett

Secretary of State