

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001660

FILED
Apr 18, 2011
Secretary of State

Entity Name: AMERICAN HOSPICE FOUNDATION, INC.

Current Principal Place of Business:

2120 L STREET, NW
SUITE 200
WASHINGTON, DC 20037

New Principal Place of Business:

Current Mailing Address:

2120 L STREET, NW
SUITE 200
WASHINGTON, DC 20037

New Mailing Address:

FEI Number: 52-1823611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMAN, GERALD M.D.
1119 PERIWINKLE WAY, #177
SANIBEL, FL 33957 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: C
Name: LUPU, DALE PHD
Address: 9200 DALEVIEW COURT
City-St-Zip: SILVER SPRING, MD 20901

Title: S
Name: DAVIES, GRANT
Address: 7101 WISCONSIN AVE, SUITE 700
City-St-Zip: BETHESDA, MD 20814

Title: T
Name: SIMS, JIM ESQ
Address: 1111 PENNSYLVANIA AVE, NW
City-St-Zip: WASHINGTON, DC 20004

Title: CEO
Name: NAIERMAN, NAOMI
Address: 2120 L STREET, NW, SUITE 200
City-St-Zip: WASHINGTON, DC 20037

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

SIGNATURE: NAOMI NAIERMAN

CEO

04/18/2011

Electronic Signature of Signing Officer or Director

Date