
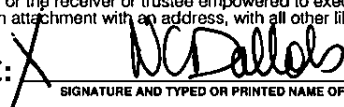


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90147 007 ****61.25

DOCUMENT # N00000000955 1. Entity Name VITAS OF NORTH FLORIDA, INC.					
Principal Place of Business 100 S. BSICAYNE BLVD., STE. 1500 ATTN: LEGAL DEPT. MIAMI, FL 33131			Mailing Address 100 S. BSICAYNE BLVD., STE. 1500 ATTN: LEGAL DEPT. MIAMI, FL 33131		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 255 East 5th Street Suite, Apt. #, etc. Suite 2600-Barbara S. Gugel			
City & State Zip Country		City & State Cincinnati, Ohio 45202 Zip Country		4. FEI Number 65-1094331	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For <input type="checkbox"/> Not Applicable \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANYN 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	C MCNAMEA, KEVIN J <input type="checkbox"/> Delete 2600 CHEMED CENTER, 225 E. FIFTH STREET CINCINNATI, OH 452024726		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition See attached for complete list	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO <input type="checkbox"/> Delete O'TOOLE, TIMOTHY S 100 SOUTH BISCAYNE BLVD., STE. 1500 MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP <input type="checkbox"/> Delete LAW, DEIRDRE 100 S. BSICAYNE BLVD., STE. 1500 MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPGS Pres <input type="checkbox"/> Delete DAVID, WESTER 100 S BISCAYNE BLVD MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: 		Naomi C. Dallob SVP & General Counsel		4/21/2005 <small>Date Daytime Phone #</small>	

ATTACHMENT#X000000000955
VITAS OF NORTH FLORIDA, INC.

40066894

OFFICERS

Chief Executive Officer
President
Executive VP-Development & Public Affairs
Sr. VP & General Counsel

Timothy S. O'Toole
David A. Wester
Dierdre Lawe
Naomi C. Dallob

DIRECTORS

Timothy S. O'Toole
Kevin J. McNamara
Dierdre Lawe

ATTACHMENT # N000000006 255
VITAS OF NORTH FLORIDA, INC.

40066894

TITLE

NAME

SOCIAL SECURITY NO.

HOME ADDRESS

BUSINESS ADDRESS

Chief Executive Officer, Director

Timothy S. O'Toole

177 Ocean Lane Drive
Key Biscayne, Florida 33149

100 South Biscayne Blvd, Ste 1500
Miami, Florida 33131

Chairman & Director

Kevin J. McNamara

949 Edwards Road
Cincinnati, Ohio 45208

Chemed Corporation
255 East 5th Street
Suite 2600
Cincinnati, Ohio 45202

President

David A. Wester

4244 Chase Avenue
Miami Beach, Florida 33140

100 South Biscayne Blvd, Ste 1500
Miami, Florida 33131

Exec VP-Dev of Public Affairs, Director

Dierdre Lawe

4950 Thoroughbred Lane
Ft. Lauderdale, Florida 33330

100 South Biscayne Blvd, Ste 1500
Miami, Florida 33131

Sr. VP & General Counsel

Naomi C. Dallob

1060 Barry Lane
Cincinnati, Ohio 45229

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255 East 5th Street
Suite 2600
Cincinnati, Ohio 45202