

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004546

FILED
Mar 23, 2009
Secretary of State

Entity Name: NORTHWEST FLORIDA HOSPICE, INC.

Current Principal Place of Business:

5041 N. 12TH AVENUE
PENSACOLA, FL 32504 US

New Principal Place of Business:

Current Mailing Address:

5041 N. 12TH AVENUE
PENSACOLA, FL 32504 US

New Mailing Address:

FEI Number: 59-2208300 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNEE, DALE O.
5041 N. 12TH AVENUE
PENSACOLA, FL 32504 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: PD () Delete
Name: KNEE, DALE O
Address: 5041 N. 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32504

Title: CD () Delete
Name: OXENHAM, RANDY C.
Address: 1401 N. TARRAGONA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: SD () Delete
Name: HERR, ROBIN D
Address: 715 S. PALAFOX STREET
City-St-Zip: PENSACOLA, FL 32502

Title: TD () Delete
Name: ESPENSCHIED, CLAUDIA E
Address: 600 S. BARRACKS STREET, SUITE 210
City-St-Zip: PENSACOLA, FL 32502

Title: D () Delete
Name: MILLS, ROBERT J DR
Address: 4491 WHISPER DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: VD () Delete
Name: SCHLENKER, PATRICK A
Address: 1360 BRICKYARD ROAD
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CD (X) Change () Addition
Name: SCHLENKER, PATRICK A
Address: 1360 BRICKYARD ROAD
City-St-Zip: CHIPLEY, FL 32428

Title: SD (X) Change () Addition
Name: CAMPBELL, JAMES S ESQ
Address: 501 COMMENDENCIA STREET
City-St-Zip: PENSACOLA, FL 32502

Title: TD (X) Change () Addition
Name: ESPENSCHIED, CLAUDIA E
Address: 362 GULF BREEZE PARKWAY # 141
City-St-Zip: GULF BREEZE, FL 32561

Title: D (X) Change () Addition
Name: OXENHAM, RANDY C
Address: 1401 N. TARRAGONA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: VD (X) Change () Addition
Name: HERR, ROBIN D
Address: 1105 WILLOWOOD CIRCLE
City-St-Zip: GULF BREEZE, FL 32463

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: KAREN YOUNG

VP

03/23/2009

Electronic Signature of Signing Officer or Director

Date