2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007799

Apr 19, 2011 Secretary of State

Entity Name: GOOD SHEPHERD HOSPICE, INC.

Current Principal Place of Business: New Principal Place of Business:

115 S. MISSOURI AVE 320 W. MAIN STREET SUITE 500 LAKELAND, FL 33815 LAKELAND, FL 33815

Current Mailing Address: New Mailing Address:

C/O HPC HEALTHCARE, INC. (ATTN LEGAL DEPT) 12973 TELECOM PARKWAY, SUITE 100 TEMPLE TERRACE, FL 33637

FEI Number: 20-5276923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FERNANDEZ, KATHY L 12973 TELECOM PARKWAY SUITE 100 TEMPLE TERRACE, FL 33637 US

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: DCP

Name: FERNANDEZ, KATHY L

Address: 12973 TELECOM PARKWAY, SUITE 100

City-St-Zip: TEMPLE TERRACE, FL 33637

Title: DVC

Name: YENTES, REX R
Address: 320 W. MAIN STREET
City-St-Zip: LAKELAND, FL 33815

Title: DS

Name: WEGMAN, PHILLIP D Address: 320 W. MAIN STREET City-St-Zip: LAKELAND, FL 33815

Title: DCOO

Name: LUTTON, ANDREW E

Address: 12973 TELECOM PARKWAY, SUITE 100

City-St-Zip: TEMPLE TERRACE, FL 33637

Title: DEVP

Name: WALLACE, GEORGE H

Address: 12973 TELECOM PARKWAY, SUITE 100

City-St-Zip: TEMPLE TERRACE, FL 33637

Title: DVP

Name: WHITE, DARRELL

Address: 12973 TELECOM PARKWAY, SUITE 100 City-St-Zip: TEMPLE TERRACE, FL 33637

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: DARRELL WHITE DVP 04/19/2011

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2011 ANNUAL REPORT ADDENDUM

Entity Name: GOOD SHEPHERD HOSPICE, INC.

Document #: N06000007799

Date: April 19, 2011

Additional Officers and Directors of Good Shepherd Hospice, Inc.:

NAME	ADDRESS	TITLE
Brian D. Hinton	320 W. Main Street, Lakeland, FL 33815	D
Jane M. Hancock	320 W. Main Street, Lakeland, FL 33815	D
Phillip E. Walker	320 W. Main Street, Lakeland, FL 33815	D
Stanley L. Piotrowski	320 W. Main Street, Lakeland, FL 33815	. D
James T. Joiner	320 W. Main Street, Lakeland, FL 33815	D
John T. Barnhart	320 W. Main Street, Lakeland, FL 33815	D
Ronald S. Schonwetter,	12973 Telecom Parkway, Suite 100, Temple	D/EVP
M.D.	Terrace, FL 33637	
William C. Bredbenner	320 W. Main Street, Lakeland, FL 33815	EOD/ED
Stewart W. Stein, M.D.	320 W. Main Street, Lakeland, FL 33815	EOD/Med. Dir.
Vicki D. Marsee	12973 Telecom Parkway, Suite 100, Temple	EOD
	Terrace, FL 33637	
Gayle E. Eaton	12973 Telecom Parkway, Suite 100, Temple	AS
	Terrace, FL 33637	į