

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007616

FILED
Mar 10, 2009
Secretary of State

Entity Name: HOSPICE BY THE SEA FOUNDATION, INC.

Current Principal Place of Business:

1531 WEST PALMETTO PARK ROAD
BOCA RATON, FL 33486

New Principal Place of Business:

1531 W. PALMETTO PARK ROAD
BOCA RATON, FL 33486

Current Mailing Address:

1531 WEST PALMETTO PARK ROAD
BOCA RATON, FL 33486

New Mailing Address:

1531 W. PALMETTO PARK ROAD
BOCA RATON, FL 33486

FEI Number: 59-1952942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HRAWG CORP.
1801 N. MILITARY TRAIL, SUITE 200
BOCA RATON, FL 33431 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO () Change (X) Addition
Name: ALDERSON, PAULA J
Address: 1531 W. PALMETTO PARK ROAD
City-St-Zip: BOCA RATON, FL 33486

Title: COO () Change (X) Addition
Name: BROWN, GILBERT J
Address: 1531 W. PALMETTO PARK ROAD
City-St-Zip: BOCA RATON, FL 33486

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: PAULA ALDERSON

CEO

03/10/2009

Electronic Signature of Signing Officer or Director

Date