

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N13058

1. Entity Name

VNA HEALTH SERVICES, INC.

Principal Place of Business

1111 - 36TH STREET
VERO BEACH FL 32960-3514

Mailing Address

1111 - 36TH STREET
VERO BEACH FL 32960-3514

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

KENNEDY, SHARON L.
1111 - 36TH STREET
VERO BEACH FL 32960-3514

4. FEI Number 59-2624839

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE ~~SD~~ ☐ Delete
NAME MORGAN, KEITH
STREET ADDRESS 700 20TH ST
CITY-ST-ZIP VERO BEACH FL

TITLE PCEO ☐ Delete
NAME KENNEDY, SHARON L.
STREET ADDRESS 1111-36TH ST.
CITY-ST-ZIP VERO BEACH FL 32960-3514

TITLE CD ☐ Delete
NAME TURBIE, MARIE
STREET ADDRESS 1731 VICTORIA CIR
CITY-ST-ZIP VERO BEACH FL

TITLE D ☐ Delete
NAME FEGERT, FORD
STREET ADDRESS 817 BEACHLAND BLVD.
CITY-ST-ZIP VERO BEACH FL

TITLE TD ☒ Delete
NAME COURSEN, R.D.
STREET ADDRESS 900 RIOMAR DR
CITY-ST-ZIP VERO BEACH FL

TITLE D ☒ Delete
NAME WILDS, SARA
STREET ADDRESS 158 ANCHOR DRIVE
CITY-ST-ZIP VERO BEACH FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE STD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90436 035 ****61.25

929316



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

Attachment
929316
#N13058

VNA Health Services, Inc.

FEI Number 59-2624839

Additional Officers and Directors 2000-2001, Directors terms expiring April 2001

VCD

Cooney, Stubbs
319 Live Oak Road
Vero Beach, FL 32963

VP

Margot Kornicks
1111 36th Street
Vero Beach, FL 32960

VP

Brian Walsh
1111 36th Street
Vero Beach, FL 32960

Directors:

Matthew Zoffer, DO
2300 5th Avenue
Vero Beach, FL 32960

John Moore III
5070 N A1A #200
Vero Beach, FL 32963

Ann Marie McCrystal
511 Bay Drive
Vero Beach, FL 32963