

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90069 010 ****61.25

DOCUMENT # N13059

1. Entity Name

**VISITING NURSE ASSOCIATION OF THE TREASURE
COAST, INC.**



Principal Place of Business

Mailing Address

1111 36TH ST. 1110 35th Lane
VERO BEACH FL 32960-3514

1111 36TH ST. 1110 35th Lane
VERO BEACH FL 32960-3514

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2664912

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROOME, SHARON K.

1111 36TH STREET 1110 35th Lane
VERO BEACH FL 32960-3514

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

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
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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
PCEO
BROOME, SHARON K ☐ Delete
1111 36TH ST
VERO BEACH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
1110 35th Lane

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
KANAREK, CAROL ☐ Delete
1241 POINTRAS DRIVE
VERO BEACH FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCD
MCDONALD, JOHN ☐ Delete
1770 37TH ST
VERO BEACH FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
LOHUIS, NEAL ☒ Delete
1025 FLAMEVINE LN
VERO BEACH FL 32963

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
Michael Kmetz
3111 Cardinal Drive
Vero Beach, FL 32963

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
WILFRED, SMALL MD ☐ Delete
2733 OCEAN DRIVE
VERO BEACH FL 32963

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

Sharon K. Broome

2/8/05

978-5577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #