## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N17456

FILED Mar 30, 2010 Secretary of State

Entity Name: VISITING NURSE ASSOCIATION & HOSPICE FOUNDATION, INC.

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

1110 35TH LANE

VERO BEACH, FL 32960

**Current Mailing Address: New Mailing Address:** 

1110 35TH LANE VERO BEACH, FL 32960

FEI Number: 59-2804739 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

NEWBROUGH, JAMES P BARRERA, RON 1110 35TH LANE 1110 35TH LANE

VERO BEACH, FL 32960 VERO BEACH, FL 32960 US 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: RON BARRERA 03/30/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

**PCEO** 

BARRERA, RON Name: Address: 1110 35TH LANE City-St-Zip: VERO BEACH, FL 32960

Title:

Name: CAROL, KANAREK Address: 1241 POITRAS DR City-St-Zip: VERO BEACH, FL 32963

Title: SD

MARESI, LALA Name:

185 SPRINGLINE DRIVE Address: City-St-Zip: VERO BEACH, FL 32963

Title: TD

Name: KELLER, DON

480 INDIAN HARBOR RD Address: City-St-Zip: VERO BEACH, FL 32963

VCD Title:

CAMPIONE, JOHN Name: 31 ROYAL PALM PT Address: City-St-Zip: VERO BEACH, FL 32960

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: RON BARRERA CEO 03/30/2010