

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27921

FILED
Feb 24, 2010
Secretary of State

Entity Name: HOSPICE FOUNDATION OF LAKE AND SUMTER, INC.

Current Principal Place of Business:

2445 LANE PARK ROAD
TAVARES, FL 327786660

New Principal Place of Business:

Current Mailing Address:

2445 LANE PARK ROAD
TAVARES, FL 327786660

New Mailing Address:

FEI Number: 59-2915060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUGGIE, THOMAS H
14229 U.S. HWY 441
TAVARES, FL 32778 US

Name and Address of New Registered Agent:

BUCHHOLZ, NICK
2445 LANE PARK ROAD
TAVARES, FL 32778 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: NICK BUCHHOLZ

02/24/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: RUGGIE, THOMAS H
Address: 2100 LAKE EUSTIS DR
City-St-Zip: TAVARES, FL 32778 US

Title: V
Name: CARPENTER, KENNETH W
Address: 2701 SOUTH BAY STREET
City-St-Zip: EUSTIS, FL 32726 US

Title: T
Name: COLLIER, GREGORY C
Address: 2025 WEST OLD US HIGHWAY 441
City-St-Zip: MOUNT DORA, FL 32757

Title: S
Name: BUCHANAN, TIGE
Address: 32815 RADIO ROAD
City-St-Zip: LEESBURG, FL 34788 US

Title: D
Name: PYLE, STEVEN P
Address: 4063 N. GOLDENROD RD, STE 208
City-St-Zip: WINTER PARK, FL 32792 US

Title: D
Name: NAGEL, MERIDETH
Address: 450 EAST HIGHWAY 50, SUITE 4
City-St-Zip: CLERMONT, FL 34711 US

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: NICK BUCHHOLZ

D

02/24/2010

Electronic Signature of Signing Officer or Director

Date