FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 12:22

DOCUMENT # **N93000001672 (5)**

1. Corporation Name

THE HOSPICE INSTITUTE OF THE FLORIDA SUNCOAST, I NC.

Principal Place of Business	Mailing Address
300 E BAY DR LARGO FL 34640	300 E BAY DR LARGO FL 34640

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/14/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3176721 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
21	26		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
City & State 23	City & State 28	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	$68.75 Supplemental Fee Not Required
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LABYAK, MARY 300 E BAY DR LARGO FL 34640	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	SEE ATTACHED SHEET	☐ Change ☐ Addition
NAME	LABYAK, MARY	12 NAME		
STREET ADDRESS	300 E BAY DR	13 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL 34640	14 CITY-ST-ZIP		
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	WALTER, KIMBERLY	22 NAME		
STREET ADDRESS	300 E BAY DR	23 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL 34640	24 CITY-ST-ZIP		
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	RICK, KEVIN	32 NAME		
STREET ADDRESS	300 E BAY DR	33 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL 34640	34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attached sheet with an address.

SIGNATURE: Mary J. Labyak 4/3/95 813-586-4432
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004000

FLORIDA DEPARTMENT OF STATE
1995 1ST NOTICE NONPROFIT COPORATION ANNUAL REPORT N93000001672

THE HOSPICE INSTITUTE OF THE FLORIDA SUNCOAST, INC.
#N93000001672 (5)

13. Additions/Changes to Officers and Directors in 12

D CHANGE
Labyak, Mary
300 E Bay Dr
Largo FL 34640

D [redacted]
[redacted]
[redacted]
[redacted]

D CHANGE
Rick, Kevin
300 E Bay Dr
Largo FL 34640

TR/P ADDITION
Chamberlain, Kerry
13644 Walsingham Rd
Largo FL 34644

TR/V ADDITION
Etten, Mary Jean
7024 Hibiscus Ave S #4
St Petersburg FL 33707

TR/T ADDITION
McIntosh, Nancy
11501 Grove Street
Seminole FL 34642

TR ADDITION
Allen, Buck
2736 Timberline Court
Clearwater FL 34621

TR ADDITION
Christie, Joan Dr.
10388 Barry Dr
Largo FL 34644

TR ADDITION
French, Peter Dr.
140 7th Ave S
St Petersburg FL 33701

TR ADDITION
Hale, William Dr.
207 Jeffords St
Clearwater FL 34616-3823

TR ADDITION
Heller, H William Dr.
140 7th Ave S
St Petersburg FL 33701

TR ADDITION
Little, Michael G.
911 Chestnut Street
Clearwater FL 34617

TR ADDITION
Miller, Robert Dr.
1301 Fifth Ave N
St Petersburg FL 33705

TR ADDITION
Moody, Linda Dr.
12901 Bruce B Downs Blvd
Tampa FL 33612

TR ADDITION
Nero, Carrie W Dr.
11351 Ulmerton Road #100
Largo FL 34648-1630

TR ADDITION
Ottaviani, A N Dr.
13644 Walsingham Rd
Largo FL 34644

TR ADDITION
Parks, Jodi Dr.
PO Box 13489 "N/A"
St Petersburg FL 33733

TR ADDITION
Susik, Helen
12901 Bruce B Downs Blvd
Tampa FL 33612-4799

TR ADDITION
Williams, Thomas C
21649 US Hwy 19 N
Clearwater FL 34618