2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2010
Secretary of State

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Entity Name: FOUNDATION FOR END-OF-LIFE CARE, INC.

Current Principal Place of Business:

5430 NW 33RD AVENUE
106
FT. LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

5430 NW 33RD AVENUE
106
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 65-0943337 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MESSICK, DELORES
5430 NW 33 AVENUE
106
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CP
Name: WESTBROOK, HUGH A
Address: 5430 NW 33 AVENUE - SUITE 106
City-St-Zip: FT. LAUDERDALE, FL 33309 US

Title: D
Name: PORTER, KIM L PHD
Address: 5430 NW 33 AVENUE - #106
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D
Name: WALLACE, HAROLD G
Address: 2601 CAMMIE STREET
City-St-Zip: DURHAM, NC 27705

Title: T
Name: COLLIFLOWER, ESTHER
Address: 5430 NW 33 AVENUE - #106
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: S
Name: DOLORES, MESSICK
Address: 5430 NW 33 AVE - #106
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D
Name: MCKENNA, MARY L
Address: 912 CHERRY STREET
City-St-Zip: ORANGE, TX 77630

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: DOLORES B. MESSICK SEC 03/18/2010

Electronic Signature of Signing Officer or Director — Date