2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2012
Secretary of State

DOCUMENT# N99000003013

Entity Name: TRINITY HOSPICE CARE SERVICES, INC.

Current Principal Place of Business:

6151 MIRAMAR PARKWAY
SUITE 101
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

6151 MIRAMAR PARKWAY
SUITE 101
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 58-2474331 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOBGO, CHUCK PA
2800 W OAKLAND PK BLVD
209
OAKLAND, FL 33311 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: PD
Name: SMITH, GABRIEL
Address: 18612 SW 41 STREET
City-St-Zip: MIRAMAR, FL 33029

Title: STD
Name: CHERIFILUS, EDWIN
Address: 18612 SW 41 STREET
City-St-Zip: MIRAMAR, FL 33029

Title: VD
Name: SMITH, MARIE
Address: 18612 SW 41 STREET
City-St-Zip: MIRAMAR, FL 33029

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: GABRIEL T SMITH PD 04/12/2012

Electronic Signature of Signing Officer or Director — Date