

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000016194

Entity Name: HOSPICE UNIVERSITY, INC.

FILED
Feb 07, 2011
Secretary of State

Current Principal Place of Business:

474 LAKEWOOD DRIVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

474 LAKEWOOD DRIVE
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 26-3314127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIPACE, FRANK
474 LAKEWOOD DRIVE
WINTER PARK, FL 32789 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: PRES
Name: DIPACE, FRANK
Address: 474 LAKEWOOD DRIVE
City-St-Zip: WINTER PARK, FL 32789

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANK DIPACE

PRES

02/07/2011

Electronic Signature of Signing Officer or Director

Date