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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **V35972**

1. Corporation Name
HOSPICE, INC.



Principal Place of Business
 ATTN: LEGAL DEPARTMENT
 100 S. BISCAYNE BLVD., SUITE 1500
 MIAMI FL 33131

Mailing Address
 ATTN: LEGAL DEPARTMENT
 100 S. BISCAYNE BLVD., SUITE 1500
 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/14/1992

4. FEI Number
65-0160635

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

25 Zip Country

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

30 Zip Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

TITLE DELETE

NAME **DCEO WESTBROOK, HUGH A**

STREET ADDRESS **100 S BISCAYNE BLVD., SUITE 1500**

CITY-ST-ZIP **MIAMI FL**

TITLE DELETE

NAME **VPT WESTER, DAVID A.**

STREET ADDRESS **100 S. BISCAYNE BLVD., SUITE 1500**

CITY-ST-ZIP **MIAMI FL 33131**

TITLE DELETE

NAME **AS HARRIS, PETER H.**

STREET ADDRESS **100 S. BISCAYNE BLVD., SUITE 1500**

CITY-ST-ZIP **MIAMI FL**

TITLE DELETE

NAME **D WILLIAMS, J. R**

STREET ADDRESS **100 S BISCAYNE BLVD., STE 1500**

CITY-ST-ZIP **MIAMI FL**

TITLE DELETE

NAME **SVP COMBS, THOMAS E.**

STREET ADDRESS **100 S BISCAYNE BLVD., STE 1500**

CITY-ST-ZIP **MIAMI FL 33131**

TITLE DELETE

NAME **SVP STERLING, MARK A**

STREET ADDRESS **100 S BISCAYNE BLVD., STE 1500**

CITY-ST-ZIP **MIAMI FL 33131**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME **SEE ATTACHED**

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 3/1/99 305-374-4143
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

199426.90020-12

V35972

HOSPICE, INC.

Board of Directors

Hugh A. Westbrook, Chairman
100 South Biscayne Boulevard, Fifteenth Floor
Miami, Florida 33131

J.R. Williams, M.D.
100 South Biscayne Boulevard, Fifteenth Floor
Miami, Florida 33131

Thomas E. Combs
100 South Biscayne Boulevard, Fifteenth Floor
Miami, Florida 33131

Esther Colliflower
100 South Biscayne Boulevard, Fifteenth Floor
Miami, Florida 33131

199426.90020.12
V35972

HOSPICE, INC.

Officers

Hugh A. Westbrook
Chairman of the Board; President; Chief Executive Officer
100 South Biscayne Boulevard, Suite 1500
Miami, Florida 33131

Thomas E. Combs
Senior Vice President
100 South Biscayne Boulevard, Suite 1500
Miami, Florida 33131

Deirdre Lawe
Senior Vice President
100 South Biscayne Boulevard, Suite 1500
Miami, Florida 33131

David A. Wester
Vice President; Treasurer; Assistant Secretary
100 South Biscayne Boulevard, Suite 1500
Miami, Florida 33131

Robert D. Clark
Vice President, General Counsel, Secretary
100 South Biscayne Boulevard, Suite 1500
Miami, Florida 33131