

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747179

Entity Name: TIDEWELL HOSPICE, INC.**Current Principal Place of Business:**5955 RAND BLVD.
SARASOTA, FL 34238**Current Mailing Address:**5955 RAND BLVD.
SARASOTA, FL 34238 US**FEI Number:** 59-1911861**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLALOCK WALTERS, P.A.
802 11TH STREET WEST
BRADENTON, FL 34205 US*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:** JENIFER S. SCHEMBRI

04/25/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIR
Name LOGAN, KEVIN P
Address 5955 RAND BOULEVARD
City-State-Zip: SARASOTA FL 34238

Title PRESIDENT, CEO
Name FLEECE, JONATHAN D.
Address 5955 RAND BLVD.
City-State-Zip: SARASOTA FL 34238

Title VICE CHAIR
Name MAYPER, MATTHEW B
Address 5955 RAND BOULEVARD
City-State-Zip: SARASOTA FL 34238

Title TREASURER
Name BUCHANAN, KIMBERLIE A.
Address 5955 RAND BOULEVARD
City-State-Zip: SARASOTA FL 34238

Title SECRETARY
Name EPPARD, RENEE W
Address 5955 RAND BOULEVARD
City-State-Zip: SARASOTA FL 34238

Title PRESIDENT/CEO
Name FLEECE, JONATHAN D
Address 5955 RAND BLVD.
City-State-Zip: SARASOTA FL 34238

Title CFO
Name BOUHAMID, SAIDA
Address 5955 RAND BLVD.
City-State-Zip: SARASOTA FL 34238

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: JONATHAN D. FLEECE

PRESIDENT, CEO

04/25/2022

Electronic Signature of Signing Officer/Director Detail

Date