2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765654

Entity Name: FLORIDA HOSPICE AND PALLIATIVE CARE ASSOCIATION, INC.

FILED Jan 14, 2025 **Secretary of State** 6110221990CC

Current Principal Place of Business:

817 N GADSDEN STREET TALLAHASSEE, FL 32303

Current Mailing Address:

817 N GADSDEN STREET TALLAHASSEE, FL 32303 US

FEI Number: 59-2685885 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEDFORD, PAUL A 817 N GADSDEN STREET TALLAHASSEE, FL 32303 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:

Date Electronic Signature of Registered Agent

Name

Title

ROA, JAYSEN

Officer/Director Detail :

Title PRESIDENT & CHIEF EXECUTIVE Title IMMEDIATE PAST CHAIR

OFFICER

LEDFORD, PAUL A Name 1095 WHIPPOORWILL LANE Address

817 N GADSDEN STREET Address NAPLES FL 34105-3847 City-State-Zip: City-State-Zip: TALLAHASSEE FL 32303

INTERNAL AFFAIRS - CHAIR ELECT Title BOARD CHAIR 2024 - 2026 Name FLEECE, JONATHAN

PONDER-STANSEL, SUSAN Name Address 6310 CAPITAL DRIVE, STE 100

4266 SUNBEAM RD Address LAKEWOOD RANCH FL 34202 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32257-2425

Title **SECRETARY** Title VICE CHAIR EXTERNAL AFFAIRS

Name WHITE, RHONDA Name HUSTED, PATTY

Address 12470 TELECOM DR STE 301 Address 1695 SE INDIAN ST City-State-Zip: TEMPLE TERRACE FL 33637 City-State-Zip: STUART FL 34997

Title DIRECTOR AT-LARGE I

TREASURER Title Name WARD, LINDA

Name KENWORTHY, VALERIE 2061 COLLIER PKWY Address

Address 1131 W NEW HAVEN AVE; STE 102 City-State-Zip: LAND O' LAKES FL 34639-5202

City-State-Zip: WEST MELBOURNE FL 32904-4046

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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.

01/14/2025 SIGNATURE: PAUL A. LEDFORD PRESIDENT & CEO

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR AT-LARGE II
Name ARREDONDO, LINDA
Address 304 LAGRANDE BLVD

City-State-Zip: THE VILLIAGES FL 32159