2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01467

Entity Name: CORNERSTONE HOSPICE & PALLIATIVE CARE, INC.

FILED Apr 28, 2023 Secretary of State 8959676886CC

Current Principal Place of Business:

2445 LANE PARK ROAD TAVARES, FL 32778-9660

Current Mailing Address:

12470 TELECOM DRIVE, SUITE 301

ATTN: LEGAL DEPT

TEMPLE TERRACE, FL 33637 US

FEI Number: 59-2330114 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLOSKY, ANDREW K 12470 TELECOM DRIVE, SUITE 301 TEMPLE, FL 33637 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title CEO

Name HAGE, CANDICE Name LEE, CHARLES O

Address 2210 CR 202 Address 2445 LANE PARK ROAD

City-State-Zip: OXFOR FL 34484 City-State-Zip: TAVARES FL 32778-9660

Title OTHER, IMMEDIATE PAST CHAIR Title DIRECTOR

NameADRID, ROBERT PNameHOWELL, MICHAEL DR.Address4141 LAKE FORESTAddress2301 MAITLAND PARKWAY
SUITE 125, 1ST FLOOR

City-State-Zip: MOUNT DORA FL 32757

City-State-Zip: MAITLAND PARKWAY FL 32751

Title DIRECTOR Title DIRECTOR

NameHUSSEIN, MAEN DR.NameMASK, RANDOLPHAddress4100 WATERMAN WAYAddress3432 S.E. 20TH LANECity-State-Zip:TAVARES FL 32778City-State-Zip: SUMTERVILLE FL 33585

Title CHAIR Title COO

Name TERRY, WENDY Name WHITE, RHONDA

Address 16623 APPALOOSA TRAIL Address 2445 LANE PARK ROAD

City-State-Zip: MONTVERDE FL 34756 City-State-Zip: TAVARES FL 32778-9660

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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.

SIGNATURE: TODD WEBB CFO 04/28/2023

Officer/Director Detail Continued:

Title DIRECTOR

Name STARCHER, MARK

Address 866 S. DUNCAN DRIVE

City-State-Zip: TAVARES FL 32778

Title DIRECTOR

Name AUTRY, STEPHEN DR.

Address 1765 WADING HERON WAY

City-State-Zip: THE VILLAGES FL 32163

Title CFO

Name WEBB, TODD

Address 2445 LANE PARK ROAD

City-State-Zip: TAVARES FL 32778

Title VICE CHAIR

Name NAGEL, MERIDETH

Address 450 E. HWY 50

SUITE 4

City-State-Zip: CLERMONT FL 34711

Title DIRECTOR

Name BUCHANAN, TIGE

Address 19751 ELDORADO DRIVE

City-State-Zip: EUSTIS FL 32726