2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2016
Secretary of State
CC4109414715

DOCUMENT# N01773

Entity Name: HOSPICE OF THE FLORIDA KEYS, INC.

Current Principal Place of Business:

1319 WILLIAM STREET
KEY WEST, FL 33040

Current Mailing Address:

1319 WILLIAM STREET
KEY WEST, FL 33040 US

FEI Number: 59-2386289

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ZIEGLER, STEVEN M
4300 NW 90TH BLVD.
GAINESVILLE, FL 32606 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: STEVEN M. ZIEGLER 02/03/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	ANDERSON, RICHARD M. MD
Address	631 NW 28TH STREET
City-State-Zip:	GAINESVILLE FL 32607

Title	DIRECTOR
Name	DAVIS, JOSEPH W.
Address	2735 NW 22ND DRIVE
City-State-Zip:	GAINVESVILLE FL 32605

Title	DIRECTOR, SECRETARY
Name	DOTSON, ALBERT E.
Address	17901 SW 78TH AVENUE
City-State-Zip:	PALMETTO BAY FL 33157

Title	DIRECTOR, TREASURER
Name	EPLING, ROBERT LEE
Address	14800 SW 238TH STREET
City-State-Zip:	HOMESTEAD FL 32058

Title	DIRECTOR, CHAIRMAN
Name	BUTLER, SCOTTIE J.
Address	5521 SW 35TH WAY
City-State-Zip:	GAINESVILLE FL 32608

Title	DIRECTOR
Name	DOERR, BENJAMIN I. JR.
Address	1411 NW 46TH TERRACE
City-State-Zip:	GAINESVILLE FL 32605

Title	DIRECTOR, VC
Name	DUNLAP, JOE G.
Address	2736 NW 77TH BLVD. 263
City-State-Zip:	GAINESVILLE FL 32606

Title	DIRECTOR
Name	FLETCHER, GEORGE E.
Address	1223 NW 114TH DRIVE
City-State-Zip:	GAINESVILLE FL 32606

Continues on page 2

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: STEVEN M. ZIEGLER ASST SECRETARY 02/03/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR, CEO
Name GALLAGHER, MICHAEL P.
Address 5523 NW 52ND AVENUE
City-State-Zip: GAINESVILLE FL 32653

Title DIRECTOR
Name HUDSON, ROBERT CHARLES
Address 10876 SW 11TH LANE
City-State-Zip: GAINESVILLE FL 32607

Title DIRECTOR
Name NATIELLO, THOMAS A.
Address 4925 SAN AMARO COURT
City-State-Zip: CORAL GABLES FL 33146

Title DIRECTOR
Name SASSER, JACKSON N.
Address 271 SW 129TH TERRANCE
City-State-Zip: GAINESVILLE FL 32606

Title PRESIDENT
Name POOLE, JAMES L.
Address 193 NW DOGWOOD TERRACE
City-State-Zip: LAKE CITY FL 32055

Title ASST. SECRETARY
Name AYERS, CATHERINE E.
Address 6222 NW 19TH PLACE
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name HOOD, GLENDA E.
Address 1210 LANCASTER DRIVE
City-State-Zip: ORLANDO FL 32806

Title DIRECTOR
Name MOONEY, PAMELA JO PHD
Address 555 5TH AVENUE NE
PH1
City-State-Zip: ST. PETERSBURG FL 33146

Title DIRECTOR
Name PHILIP, PAUL R.
Address 1200 GINGER CIRCLE
City-State-Zip: WESTON FL 33326

Title DIRECTOR
Name STRINGFELLOW, JAMES L. SR.
Address 7824 SW 43RD DRIVE
City-State-Zip: GAINESVILLE FL 32608

Title ASST. SECRETARY
Name ZIEGLER, STEVEN M.
Address 156 DOCKSIDE CIRCLE
City-State-Zip: WESTON FL 33327

Title ASST. TREASURER
Name STUART, RANDALL L.
Address 3544 SW 10TH STREET
City-State-Zip: GAINESVILLE FL 32608