

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000003007

Entity Name: THE HOSPICE OF ST. FRANCIS FOUNDATION, INC.**Current Principal Place of Business:**1250-B GRUMMAN PL
TITUSVILLE, FL 32780**Current Mailing Address:**1250-B GRUMMAN PL
TITUSVILLE, FL 32780 US**FEI Number:** 47-5116106**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ABELN, MARSHA L
1250-B GRUMMAN PL
TITUSVILLE, FL 32780 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:** MARSHA ABELN

03/08/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name HURT, ANTHONY
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title CHAIRMAN
Name RODRIGUEZ, KIM
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title PRESIDENT
Name KILLIAN, JOSEPH
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title SECRETARY
Name ROMANO, PATRICIA
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name MCALPINE, CHRIS
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title VC
Name COLEMAN, MARY
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name SYLVESTER, N. CHRISTINE
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name ELLIS, DONNA
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

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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: MARSHA ABELN**CFO**

03/08/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BROOME, KELLEY
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name RYAN, TERESA
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title CFO
Name ABELN, MARSHA
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name DASKI, DUANE
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name GRIFFIN, C. STEVE
Address 1250-B GRUMMAN PL
City-State-Zip: TITUSVILLE FL 32780