2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2014
Secretary of State
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Entity Name: GENTIVA HOSPICE FOUNDATION, INC.

Current Principal Place of Business:

3350 RIVERWOOD PARKWAY, STE. 1400
ATLANTA, GA 30339

Current Mailing Address:

4850 WRIGHT RD
STE 168
STAFFORD, TX 77477

FEI Number: 75-2851746

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PD
Name	SHANER, JEFF
Address	3350 RIVERWOOD PARKWAY, STE. 1400
City-State-Zip:	ATLANTA GA 30339

Title	VPD
Name	PARNELL, SALLY A
Address	3350 RIVERWOOD PARKWAY, STE. 1400
City-State-Zip:	ATLANTA GA 30339

Title	STD
Name	CAMPERLENGO, JOHN N
Address	3350 RIVERWOOD PARKWAY, STE. 1400
City-State-Zip:	ATLANTA GA 30339

Title	D
Name	ROLLERSON, THOMAS
Address	1528 CHAPALA STREET, STE. 304
City-State-Zip:	SANTA BARBARA CA 93101

Title	ED
Name	GRIFFIN, MARY P
Address	3350 RIVERWOOD PARKWAY, STE. 1400
City-State-Zip:	ATLANTA GA 30339

Title	DIRECTOR
Name	BURGESS, TONI
Address	3350 RIVERWOOD PARKWAY, STE. 1400
City-State-Zip:	ATLANTA GA 30339

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: JOHN N. CAMPERLENGO SECRETARY/TREASURER 03/28/2014

Electronic Signature of Signing Officer/Director Detail — Date