



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Non-Profit
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000488869

2. Name of Corporation Gentiva Hospice Foundation

3. State of Incorporation

State: TX

4. Corporate Address in Rhode Island

No. and Street: CT CORPORATION SYSTEM
450 VETERANS MEMORIAL PARKWAY,
SUITE 7A

City or Town: EAST PROVIDENCE

State: RI Zip: 02903Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 3350 RIVERWOOD PARKWAY, STE. 1400

City or Town: SCOTTSDALE State: AZ Zip: 30339 Country: UNI

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO SUPPORT AND EDUCATE PERSONS AND ORGANIZATIONS DEALING WITH LIFE
LIMITING ILLNESSES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	PAUL VERHOEVE	14614 N. KIERLAND BOULEVARD, #300N SCOTTSDALE, AZ 85254 USA
TREASURER	TODD HIGGINS	680 S. 4TH AVENUE LOUISVILLE, KY 40202 USA
SECRETARY	SHANNON DRAKE	3350 RIVERWOOD PARKWAY, STE. 1400

		ATLANTA, GA 30339 USA
DIRECTOR	SELECE BEASLEY	3350 RIVERWOOD PARKWAY, SUITE 1400 ATLANTA, GA 30339 USA
DIRECTOR	SHANNON DRAKE	3350 RIVERWOOD PARKWAY, STE. 1400 ATLANTA, GA 30339 USA
DIRECTOR	TODD HIGGINS	680 S. 4TH AVENUE LOUISVILLE, KY 40202 USA
DIRECTOR	SUSAN SENDER	3350 RIVERWOOD PARKWAY, SUITE 1400 ATLANTA, GA 30339 USA
DIRECTOR	PAUL VERHOEVE	14614 N. KIERLAND BOULEVARD, #300N SCOTTSDALE, AZ 85254 USA
DIRECTOR	TOM ROLLERSON	734 ARBOLADO ROAD SANTA BARBARA, CA 93103 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 16 Day of May, 2016 at 3:58:26 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By MARY GRIFFIN
Signature of Authorized Person

Form No. 631
Revised 09/07