

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 705193 (1)

1. Corporation Name
MERCY HOSPITAL, INC.

Principal Place of Business 3663 S MIAMI AVE MIAMI FL 33133	Mailing Address 3663 S MIAMI AVE MIAMI FL 33133-4253
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 02/13/1963	3a. Date of Last Report 02/29/1996
4. FEI Number 59-0791034	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**ROSASCO, EDWARD J JR.
3663 S. MIAMI AVE.
MIAMI FL 33133**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Edward J. Rosasco, Jr.* **Edward J. Rosasco, Jr.** **1/25/97**
President/CEO DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BRYAN, FLORENCE	
STREET ADDRESS	241 ST. GEORGE ST	
CITY-ST-ZIP	ST AUGUSTINE FL 32084	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COOK, MERRILL C JR.	
STREET ADDRESS	190 N.E. 3RD ST	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	WORLEY, SISTER ELIZABETH	
STREET ADDRESS	3663 SOUTH MIAMI AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KUHN, ANN	
STREET ADDRESS	241 ST. GEORGE ST	
CITY-ST-ZIP	ST AUGUSTINE FL 32084	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MARTIN, PEDRO	
STREET ADDRESS	1221 BRICKELL AVE 22 FL	
CITY-ST-ZIP	MIAMI FL 33131	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MERCADANTE, LUCILLE	
STREET ADDRESS	10300 S.W. 120 ST	
CITY-ST-ZIP	MIAMI FL 33176	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sister Elizabeth A. Shalby* **1-31-97 305-285-2121**
Sister Elizabeth A. Shalby Chairperson Date Daytime Phone # 0026861

CR2E037 (9/96)

ADDENDUM
MERCY HOSPITAL BOARD OF TRUSTEES

Richard Montalbano (T/D)
William R. Hough & Co.
100 S. E. Second Street, Ste. 2600
Miami, Florida 33131

Sister Suzan Foster (D)
St. Joseph Convent
241 St. George Street
St. Augustine, Florida 32084

Dorothy Norton (D)
Florida Power & Light Co.
9250 West Flagler Street
Miami, Florida 33174

Jose Basagoitia, M.D. (D)
3661 South Miami Avenue, Suite 705
Miami, Florida 33133

Kyriacos Pefkaros, M.D. (D)
3661 South Miami Avenue, Suite 806
Miami, Florida 33133

Julio Pita, M.D. (D)
3659 South Miami Avenue, Suite 6008
Miami, Florida 33133

Edward Rosasco, Jr. (P/D)
Mercy Hospital
3663 South Miami Avenue
Miami, Florida 33133

Frank Soler (D)
Miami Mensual
104 South Crandon Blvd.
Key Biscayne, Florida 33149

Steven Ullmann, Ph. D. (D)
University of Miami
1252 Memorial Drive, 240 Ashe
Coral Gables, Florida 33124

Sister Christine Zimorski, S.S.J. (VC/S/D)
St. Joseph Convent
3333 South Miami Avenue
Miami, Florida 33133

Jose Noy, M.D. (D)
3661 South Miami Avenue, Suite 306
Miami, Florida 33133