2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006210

FILED Feb 08, 2005 Secretary of State

Entity Name: MEMORIAL HEALTH SYSTEMS FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

770 WEST GRANADA BLVD SUTE 205

ORMOND BEACH, FL 32174 US

Current Mailing Address: New Mailing Address:

770 WEST GRANADA BLVD 770 WEST GRANADA BLVD SUTE 102 SUTE 205

ORMOND BEACH, FL 32174 US ORMOND BEACH, FL 32174 US

FEI Number: 31-1771522 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TRIMBLE, T.L. 111 NORTH ORLANDO AVE. WINTER PARK, FL 32803 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: CD () Delete Title: CD (X) Change () Addition

 Name:
 BURT, DAVID
 Name:
 CLARE, PAUL

 Address:
 501 S. RIDGEWOOD AVENUE
 Address:
 390 JOHN ANDERSON

 City-St-Zip:
 DAYTONA BEACH, FL 32114
 City-St-Zip:
 ORMOND BEACH, FL 32176

Title: D () Delete Title: VCD (X) Change () Addition Name: REINER, RICHARDK Name: BROWN, LONNIE

Address: 2400 BEDFORD ROAD Address: 37 OAKMONT CIR
City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORMOND BEACH, FL 32174

Title: VCD () Delete Title: D (X) Change () Addition

 Name:
 CLAIR, PAUL
 Name:
 GENTRY, MIKE

 Address:
 390 JOHN ANDERSON
 Address:
 875 STERTHAUS AV

 City-St-Zip:
 ORMOND BEACH, FL 32176
 City-St-Zip:
 ORMOND BEACH, FL 32174

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 BROWN, LONNIE
 Name:
 MEYER, DORIS

 Address:
 37 OAKMONT CIRCLE
 Address:
 9 VIA MARINO

 City-St-Zip:
 ORMOND BEACH, EL 32174
 City-St-Zip:
 PALM COAST, EL 32137

City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: PALM COAST, FL 32137

 Address:
 4 CHICKASAW COURT
 Address:
 2222 MANGO TREE DR

 City-St-Zip:
 PALM COAST, FL 32132
 City-St-Zip:
 EDGEWATER, FL 32141

Title: TD () Delete Title: D (X) Change () Addition Name: KLEIN, JULIEANN Name: CRUMP, EMMETT

Address: 222 MANGO TREE DRIVE Address: 1 TOMOKA OAKS BLVD #117
City-St-Zip: EDGEWATER, FL 32141 City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PAUL CLARE CD 02/08/2005