2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001228

FILED Mar 01, 2011 Secretary of State

Entity Name: SACRED HEART HOSPITAL ON THE EMERALD COAST GUILD, INC.

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

7800 US HIGHWAY 98 WEST DESTIN, FL 32550

Current Mailing Address: New Mailing Address:

7800 US HIGHWAY 98 WEST DESTIN, FL 32550

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

EMMANUEL, KAREN O 5151 NORTH NINTH AVENUE PENSACOLA, FL 32504 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:

Title: F

Name: BORCHERT, BARBARA
Address: 9815 HWY 98 W BV40
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: \

Name: STANKO, JAN Address: 55 NATURE WAY

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: PF

Name: JOHNSTON, JOE SR.

Address: 15500 EMERALD COAST PKWY #201

City-St-Zip: DESTIN, FL 32541

Title: T

Name: JACKSON, EILEEN Address: 196 MAGNOLIA ST

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: RS

Name: JOHNSTON, ROWENA

Address: 15500 EMERALD COAST PKWY #201

City-St-Zip: DESTIN, FL 32541

Title: PE

Name: PARKS, BARRY
Address: 4318 CARRIAGE LANE
City-St-Zip: DESTIN, FL 32541

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: JOE JOHNSTON SR. FC 03/01/2011