


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2006 8:00 am
Secretary of State

08-17-2006 90002 028 ****61.25

DOCUMENT # N04000002457

1. Entity Name
LAKEWOOD RANCH MEDICAL CENTER AUXILIARY, INCORPORATED



Principal Place of Business
**8340 LAKEWOOD RANCH BLVD
 BRADENTON, FL 34202**

Mailing Address
**8340 LAKEWOOD RANCH BLVD
 BRADENTON, FL 34202**

50025373

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
8330 LAKEWOOD RANCH BLVD
 Suite, Apt. #, etc.
 City & State
 Zip Country



06222006 Chg-NP CR2E037 (4/06)

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

4. FEI Number
06-1719766

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	COP PLOTTS, DEBBIE 8330 LAKEWOOD RANCH BLVD BRADENTON, FL 34207 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COP RILEY, MARK 8330 LAKEWOOD RANCH BLVD BRADENTON, FL 34207 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JEWELL, JOYCE 8330 LAKEWOOD RANCH BLVD BRADENTON, FL 34207 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RUSSELL, ANN 8330 LAKEWOOD RANCH BLVD BRADENTON, FL 34207 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LECEA, LEE 8330 LAKEWOOD RANCH BLVD BRADENTON, FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VEITCH, RICHARD 8330 LAKEWOOD RANCH BLVD BRADENTON, FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard Veitch* *Richard Veitch* 8/8/06 941-407-0009
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #