

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48162

FILED  
Jan 17, 2012  
Secretary of State

**Entity Name:** DOCTORS' MEMORIAL HOSPITAL, INC.

**Current Principal Place of Business:**

333 N BYRON BUTLER PKWY  
PERRY, FL 32347

**New Principal Place of Business:**

**Current Mailing Address:**

333 N BYRON BUTLER PKWY  
PERRY, FL 32347

**New Mailing Address:**

FEI Number: 59-3122517

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRETT, GARY  
333 N. BYRON BUTLER PKWY  
PERRY, FL 32347 US

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

HUTH, RICHARD  
333 N. BYRON BUTLER PKWY  
PERRY, FL 32347 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: RICHARD HUTH

01/17/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C  
Name: HANSON, AQUILLA B III  
Address: 406 GLENRIDGE ROAD  
City-St-Zip: PERRY, FL 32348

Title: T  
Name: LANIER, DEWAYNE  
Address: 3249 SAN PEDRO ROAD  
City-St-Zip: PERRY, FL 32348

Title: S  
Name: MOORE, G. CLINE  
Address: 316 W. GREEN STREET  
City-St-Zip: PERRY, FL 32347

Title: M  
Name: BRETT, GARY  
Address: 1448 BILL ADAMS ROAD  
City-St-Zip: PERRY, FL 32347

Title: M  
Name: JOHNSON, ALBERT  
Address: 2827 HENRY GIBSON ROAD  
City-St-Zip: PERRY, FL 32347

Title: M  
Name: ARNOLD, KEN  
Address: 15530 SNAPPER STREET  
City-St-Zip: PERRY, FL 32348

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: RICHARD HUTH

CEO

01/17/2012

Electronic Signature of Signing Officer or Director

Date