

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001178

FILED  
Jan 11, 2012  
Secretary of State

Entity Name: BERT FISH MEDICAL CENTER, INC.

**Current Principal Place of Business:**

401 PALMETTO STREET  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

ADMINISTRATION  
401 PALMETTO ST  
NEW SMYRNA BEACH, FL 32168 US

**New Mailing Address:**

FEI Number: 59-3306983      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HARRELL, STEVE  
401 PALMETTO ST.  
NEW SMYRNA BEACH, FL 32168 US

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

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: PD  
Name: HARRELL, STEVE  
Address: 401 PALMETTO STREET  
City-St-Zip: NEW SMYRNA, FL 32168

Title: S  
Name: ILARDI, DOREEN  
Address: 401 PALMETTO ST.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T  
Name: ALLRED, AL  
Address: 401 PALMETTO ST.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D  
Name: HERCHEK, JACQUELINE  
Address: 401 PALMETTO ST.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D  
Name: CARD, PAT  
Address: 401 PALMETTO ST  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D  
Name: HEEB, FERDINAND  
Address: 401 PALMETTO ST  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: DOREEN ILARDI

S

01/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date