

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004562

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** THE VILLAGES TRI-COUNTY MEDICAL CENTER, INC.

**Current Principal Place of Business:**

1451 EL CAMINO REAL  
THE VILLAGES, FL

**New Principal Place of Business:**

**Current Mailing Address:**

600 E DIXIE AVE  
LEESBURG, FL 34748

**New Mailing Address:**

FEI Number: 59-3527036

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRAUN, PHILLIP J  
301 W OAK TERRACE DR STE 102  
LEESBURG, FL 34748 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: C  
Name: SUSTARSIC, DAVID L MD  
Address: 511 MEDICAL PLAZA DRIVE, SUITE 101  
City-St-Zip: LEESBURG, FL 34748

Title: VC  
Name: WILLIAMS, ROBERT Q ESQ  
Address: 380 WEST ALFRED STREET  
City-St-Zip: TAVARES, FL 32778

Title: T  
Name: LEWIS, GREGORY R  
Address: PO BOX 1925  
City-St-Zip: EUSTIS, FL 32726

Title: AS  
Name: HOCKING, DALE E CPA/SVP  
Address: 600 EAST DIXIE AVE  
City-St-Zip: LEESBURG, FL 34748

Title: S  
Name: NELSON, CEILA K MD  
Address: 32721 RADIO ROAD  
City-St-Zip: LEESBURG, FL 34748

Title: PCEO  
Name: HUNTLEY, LEE S  
Address: 600 EAST DIXIE AVENUE  
City-St-Zip: LEESBURG, FL 34748

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: DALE E. HOCKING

AS

01/11/2010

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

\_\_\_\_\_  
Date