

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007575

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: ASCENSION-HEALTH - IS, INC.

## Current Principal Place of Business:

4600 EDMUNDSON RD  
ST. LOUIS, MO 63134

## New Principal Place of Business:

## Current Mailing Address:

4600 EDMUNDSON RD  
ST. LOUIS, MO 63134

## New Mailing Address:

FEI Number: 65-1257719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: CHRV ( ) Delete  
Name: COREIL, BERNICE SISTER  
Address: 4600 EDMUNDSON RD  
City-St-Zip: ST. LOUIS, MO 63134

Title: PD ( ) Delete  
Name: BROWNE, SHERRY L  
Address: 4600 EDMUNDSON RD  
City-St-Zip: ST. LOUIS, MO 63134

Title: STD ( ) Delete  
Name: HENKEL, ROBERT J  
Address: 4600 EDMUNDSON ROAD  
City-St-Zip: SAINT LOUIS, MO 63104

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: BARNER, MARK  
Address: 4600 EDMUNDSON RD  
City-St-Zip: ST. LOUIS, MO 63134

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARK BARNER

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date