# 2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 713648** 

Entity Name: MARTIN MEMORIAL MEDICAL CENTER, INC.

FILED Nov 22, 2017 Secretary of State CC3632558577

# **Current Principal Place of Business:**

200 HOSPITAL AVE STUART, FL 34994

## **Current Mailing Address:**

P.O. BOX 9010

STUART, FL 34995 US

FEI Number: 59-0637874 Certificate of Status Desired: No

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

WOSSUM, MARIAN 200 HOSPITAL AVE STUART, FL 34994 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: MARIAN WOSSUM 11/22/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	DIRECTOR, VC	Title	DIRECTOR, CHAIRMAN
Name	ORR, JAMES III	Name	LOEWENBERG, JOHN
Address	200 HOSPITAL AVE	Address	200 HOSPITAL AVE
City-State-Zip:	STUART FL 34994	City-State-Zip:	STUART FL 34994

Title **DIRECTOR** Title **DIRECTOR** Name DAYTON, PETER COLLINS, EVAN MD Name Address 200 HOSPITAL AVE Address 200 HOSPITAL AVE City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

Title DIRECTOR Title **DIRECTOR** Name GAINEY, ELMIRA Name FRANK, LYNN 200 HOSPITAL AVE Address Address 200 HOSPITAL AVE City-State-Zip: STUART FL 34994 STUART FL 34994 City-State-Zip:

Title DIRECTOR Title DIRECTOR

NameHOUGHTEN, PAMELANameNOONAN, PATRICIAAddress200 HOSPITAL AVEAddress200 HOSPITAL AVECity-State-Zip:STUART FL 34994City-State-Zip:STUART FL 34994

### Continues on page 2

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: MARIAN WOSSUM VP, CLO 11/22/2017

#### Officer/Director Detail Continued:

City-State-Zip:

STUART FL 34994

DIRECTOR Title Title DIRECTOR, PRESIDENT RITTERSBACH, GEORGE MD Name Name LORD, ROBERT L JR. Address 200 HOSPITAL AVE Address 200 HOSPITAL AVE City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

Title ASST. TREASURER Title DIRECTOR

NameCLEAVER, CHARLESNameHORTON, MARY JOAddress200 HOSPITAL AVEAddress200 HOSPITAL AVECity-State-Zip:STUART FL 34994City-State-Zip:STUART FL 34994

Title SECRETARY, DIRECTOR Title DIRECTOR

Name LICHTENBERGER, H. WILLIAM Name DOODY, JOHN

Address 200 HOSPITAL AVE

Address 200 HOSPITAL AVE
City-State-Zip: STUART FL 34994

Address 200 HOSPITAL AVE
City-State-Zip: STUART FL 34994

Title DIRECTOR Title DIRECTOR

NameGLICKMAN, JEFFREY MDNameROBBINS, HOWARDAddress200 HOSPITAL AVEAddress200 HOSPITAL AVECity-State-Zip:STUART FL 34994City-State-Zip:STUART FL 34994

Title DIRECTOR Title DIRECTOR

NameLEE NUNEZ, WYNNE DR.NameMCLAIN, GEORGE DR.Address200 HOSPITAL AVECity State Zin:STUART FL 34994

Title DIRECTOR Title DIRECTOR

Name TAYLOR, NANCYANN Name WEAKLEY, TIFFANY DR.
Address 200 HOSPITAL AVE 200 HOSPITAL AVE

City-State-Zip: STUART FL 34994

Title DIRECTOR, TREASURER Title ASST. SECRETARY
Name WEBB, THEORA Name WOSSUM, MARIAN
Address 200 HOSPITAL AVE

City-State-Zip: STUART FL 34994