

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717016

Entity Name: AUXILIARY OF ST. PETERSBURG GENERAL HOSPITAL, INC.

FILED
Jan 11, 2017
Secretary of State
CC5308795505

Current Principal Place of Business:

6500 38TH AVE. NO.
ST. PETERSBURG, FL 33710

Current Mailing Address:

6500 38TH AVE. NO.
ST. PETERSBURG, FL 33710

FEI Number: 59-2045366

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BROWN, ANITA R
6500 38TH AVE NO
SAINT PETERSBURG, FL 33710 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name KATRINECZ, ANDREW
Address 6500 38TH AVE. NO.
City-State-Zip: ST. PETERSBURG FL 33710

Title S
Name KISH, DARLINE
Address 6500 38TH AVE. NO.
City-State-Zip: ST. PETERSBURG FL 33710

Title D
Name MILES, JOAN
Address 6500 38TH AVE. NO.
City-State-Zip: ST. PETERSBURG FL 33710

Title VP
Name ST DENIS, TRISH
Address 6500 38TH AVE. NO.
City-State-Zip: ST. PETERSBURG FL 33710

Title T
Name LUCKHAM, SCOTT
Address 6500 38TH AVE. NO.
City-State-Zip: ST. PETERSBURG FL 33710

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: SCOTT LUCKHAM

TREASURER

01/11/2017

Electronic Signature of Signing Officer/Director Detail

Date