

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717016

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

02/20/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	NAGLE, RIC
Address	6500 38TH AVE. NO.
City-State-Zip:	ST. PETERSBURG FL 33710

Title	TREASURER
Name	KISH, DARLENE
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	MYERS, BETSY
Address	6500 38TH AVE. NO.
City-State-Zip:	ST. PETERSBURG FL 33710

Title	SECRETARY
Name	STAHLGREN, MARK
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: DARLENE KISH**TREASURER**

02/20/2019

Electronic Signature of Signing Officer/Director Detail

Date