2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: JUPITER MEDICAL CENTER, INC.

Current Principal Place of Business:

1210 S. OLD DIXIE HIGHWAY
JUPITER, FL 33458

Current Mailing Address:

1210 S. OLD DIXIE HIGHWAY
JUPITER, FL 33458 US

FEI Number: 59-1460239

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COURIS, JOHN D
1210 S. OLD DIXIE HIGHWAY
JUPITER, FL 33458 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	CHAIRMAN
Name	STILLEY, ROBERT J
Address	1210 SOUTH OLD DIXIE HWY
City-State-Zip:	JUPITER FL 33458

Title	VC
Name	DYTRYCH, MARTIN A CPA
Address	1210 SOUTH OLD DIXIE HWY
City-State-Zip:	JUPITER FL 33458

Title	SECRETARY
Name	WATERMAN, JACK DO
Address	1210 SOUTH OLD DIXIE HWY
City-State-Zip:	JUPITER FL 33458

Title	TREASURER
Name	DOSS, JENNIFER
Address	1210 SOUTH OLD DIXIE HWY
City-State-Zip:	JUPITER FL 33458

Title	AT LARGE
Name	CHIAPPARONE, PAUL
Address	1210 SOUTH OLD DIXIE HWY
City-State-Zip:	JUPITER FL 33458

Title	AT LARGE
Name	TADDEO, JOSEPH R
Address	1210 SOUTH OLD DIXIE HWY
City-State-Zip:	JUPITER FL 33458

Title	EX-OFFICIO
Name	COURIS, JOHN D
Address	1210 S. OLD DIXIE HIGHWAY
City-State-Zip:	JUPITER FL 33458

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: JOHN D. COURIS PRESIDENT/CEO 02/20/2017

Electronic Signature of Signing Officer/Director Detail — Date