2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2025
Secretary of State
1145443208CC

DOCUMENT# 768533

Entity Name: SANTAFE HEALTHCARE, INC.

Current Principal Place of Business:

4300 NW 89 BLVD
GAINESVILLE, FL 32606

Current Mailing Address:

4300 NW 89 BLVD
GAINESVILLE, FL 32606 US

FEI Number: 59-2317607

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ZIEGLER, STEVEN M
4300 NW 89 BLVD
GAINSVILLE, FL 32606 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	DIRECTOR
Name	DOERR, BEN I JR.
Address	1411 NW 46TH TERRACE
City-State-Zip:	GAINESVILLE FL 32605

Title	DIRECTOR, VC
Name	SASSER, JACKSON N PHD
Address	1096 SW 131ST STREET
City-State-Zip:	NEWBERRY FL 32669

Title	DIRECTOR
Name	SCHREIBER, LAWRENCE G
Address	18768 NW 244TH STREET
City-State-Zip:	HIGH SPRINGS FL 32643

Title	DIRECTOR, CHAIRMAN
Name	HOOD, GLENDA E
Address	1210 LANCASTER DRIVE
City-State-Zip:	ORLANDO FL 32806

Title	DIRECTOR, PRESIDENT/CEO
Name	ZIEGLER, STEVEN M
Address	4300 NW 89 BLVD
City-State-Zip:	GAINESVILLE FL 32606

Title	DIRECTOR
Name	MADDRON, KEVIN R
Address	4500 DARTFORD CT
City-State-Zip:	ORLANDO FL 32826

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: STEVEN ZIEGLER — CHIEF EXECUTIVE OFFICER — 04/22/2025

Electronic Signature of Signing Officer/Director Detail — Date