2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2020
Secretary of State
6242883357CC

DOCUMENT# 769732

Entity Name: MUNROE REGIONAL HEALTH SYSTEM, INC.

Current Principal Place of Business:

MARION COUNTY HOSPITAL DISTRICT
1121 SW 1ST AVE
OCALA, FL 34471

Current Mailing Address:

MARION COUNTY HOSPITAL DISTRICT
1121 SW 1ST AVE
OCALA, FL 34471 US

FEI Number: 59-2390209

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HANRATTY, JOSEPH M
723 EAST FT. KING ST
OCALA, FL 34471 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: JOSEPH M HANRATTY 02/04/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	EX, D	Title	CHAIRMAN
Name	BROMUND, CURT	Name	BIANCULLI, RICHARD
Address	1121 SW 1ST AVENUE	Address	1121 SWN1ST AVE
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471
Title	VC	Title	SECRETARY, TREASURER
Name	MCCONNELL, SAMUEL M III	Name	KLEIN, H RANDOLPH
Address	1121 SW 1ST AVE	Address	1121 SW 1ST AVE
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471

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: CURT BROMUND EX DIRECTOR 02/04/2020

Electronic Signature of Signing Officer/Director Detail — Date