

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003556

Entity Name: SACRED HEART AMBULATORY CENTER CONDOMINIUM OWNERS' ASSOCIATION, INC.

FILED
Mar 27, 2019
Secretary of State
0977213737CC

Current Principal Place of Business:

5153 N. 9TH AVENUE
SUITE 200
PENSACOLA, FL 32504

Current Mailing Address:

6688 N. CENTRAL EXPY STE 300
DALLAS, TX 75206 US

FEI Number: 90-0293505

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 VP
Name MAY, BILLY
Address 3000 MERIDIAN BLVD SUITE 200
City-State-Zip: FRANKLIN TN 37067

Title PRESIDENT
Name FOLEY, JULIE
Address 5151 N. NINTH AVENUE
City-State-Zip: PENSACOLA FL 32504

Title TREASURER
Name FOUNTAIN, CYNTHIA
Address 5151 N. NINTH AVENUE
City-State-Zip: PENSACOLA FL 32504

Title ASST. SECRETARY
Name MADISON, RUSSELL
Address 2420 EAST OLIVE ROAD STE D
City-State-Zip: PENSACOLA FL 32514

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: RUSSELL K. MADISON

ASST. SECRETARY

03/27/2019

Electronic Signature of Signing Officer/Director Detail

Date