

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010056

FILED
Jan 30, 2014
Secretary of State
CC655736027

Entity Name: PASCO REGIONAL MEDICAL CENTER VOLUNTEER FOUNDATION, INC.

Current Principal Place of Business:

13100 FORT KING ROAD
GIFT SHOP
DADE CITY, FL 33525

Current Mailing Address:

13100 FORT KING RD
GIFT SHOP
DADE CITY, FL 33525 US

FEI Number: 26-2619350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARR, ISABEL Q
5059 PIKEVIEW RD
DADE CITY, FL 33523 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 PRES
Name LEMAY, DONALD
Address 12102 SAN ANGELES DR.
City-State-Zip: SAN ANTONIO FL 33576

Title VP
Name DEVINE, JANET
Address 19245 N. U S HWY 301
City-State-Zip: DADE CITY FL 33523

Title SEC
Name CARR, ISABEL Q
Address 5059 PIKEVIEW ROAD
City-State-Zip: DADE CITY FL 33523

Title MEM
Name SMITH, IDA
Address 16501 JESSAMINE ST
City-State-Zip: DADE CITY FL 33576

Title TREA
Name CARR, ISABEL Q
Address 5059 PIKEVIEW RD
City-State-Zip: DADE CITY FL 33423

Title MEM
Name GREGORY, BEVERLY A
Address 38576 VALLEY OAKS CR #204
City-State-Zip: ZEOHYR HILLS FL 33540

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: ISABEL Q. CARR

SEC-TREAS

01/30/2014

Electronic Signature of Signing Officer/Director Detail

Date