

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000010541

FILED
Feb 09, 2016
Secretary of State
CC8702042643

Entity Name: FRIENDS OF HOPITAL ALBERT SCHWEITZER HAITI INC.

Current Principal Place of Business:

6401 DARLINGTON ROAD
PITTSBURGH, PA 15217

Current Mailing Address:

PO BOX 81026
PITTSBURGH, PA 15217 US

FEI Number: 25-1841564

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAWSON, EDWARD
92 NE 117TH AVENUE
MIAMI, FL 33161 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 P
Name RAWSON, LUCILE
Address 6401 DARLINGTON ROAD
City-State-Zip: PITTSBURGH PA 15217

Title T
Name LACKNER, VINCENT
Address 301 KINGS HIGHWAY
City-State-Zip: ROSSLYN FARMS PA 15106

Title T
Name AUGUSTIN, EVENS
Address 1888 PIONEER DR.
City-State-Zip: SEWICKLEY PA 15143

Title T
Name BRAUER, DAVE
Address PO BOX 66
City-State-Zip: PITTSBURGH PA 15015

Title S
Name ENGLISH, DENNIS
Address 325 LEAX LANE
City-State-Zip: PITTSBURGH PA 15145

Title T
Name GIBBONS, ANN
Address 5854 AYLESBORO AVE
City-State-Zip: PITTSBURGH PA 15217

Title OFFICER
Name OSTERLING, RALPH
Address 1650 BOREL PLACE SUITE 204
City-State-Zip: SAN MATEO CA 94402

Title OFFICER
Name ANDERSON, MATT
Address 205 MCADDO AVENUE, #1A
City-State-Zip: GREENSBORO NC 97406

Continues on page 2

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: LUCILE RAWSON

PRESIDENT

02/09/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name ZORATTO, ENZO
Address 551 RICHLAND LANE
City-State-Zip: PITTSBURGH PA 15221

Title OFFICER
Name DAILEY, PETER
Address 603 STANWIX STREET
City-State-Zip: PITTSBURGH PA 15222