2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19520

Entity Name: MORSELIFE HEALTH SYSTEM, INC.

Current Principal Place of Business:

4847 DAVID S. MACK DRIVE WEST PALM BEACH. FL 33417

Current Mailing Address:

4847 DAVID S. MACK DRIVE WEST PALM BEACH. FL 33417 US

FEI Number: 65-0018299 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MYERS, KEITH A 4847 DAVID S. MACK DRIVE WEST PALM BEACH, FL 33417 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

FILED May 22, 2020

Secretary of State

5255823691CC

Officer/Director Detail:

Title CFO Title CHAIRMAN

Name CHAE, HONG Name LEVIN, STEPHEN A.

Address 4847 DAVID S. MACK DRIVE Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title VC Title DIRECTOR

NameMACK, DAVID S.NameRUBENSTEIN, MITCHELLAddress4847 DAVID S. MACK DRIVEAddress4847 DAVID S. MACK DRIVECity-State-Zip:WEST PALM BEACH FL 33417City-State-Zip:WEST PALM BEACH FL 33417

Title SECRETARY/TREASURER Title DIRECTOR

Name SRIBERG, TERRI Name MEISTER, ROBERT A.

Address 4847 DAVID S. MACK DRIVE Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR Title DIRECTOR

Name GREENBAUM, RYNA Name JACOBS, JOSEPH

Address 4847 DAVID S. MACK DRIVE Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

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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: HONG CHAE CFO/SR. VP OF FINANCE 05/22/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

TitleDIRECTORTitleDIRECTORNameJAFFE, ROBERTNameKATZ, STANLEY

Address 4847 DAVID S. MACK DRIVE Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR Title DIRECTOR

Name LORING, ARTHUR S. Name MARGOLIS, MICHAEL

Address 4847 DAVID S. MACK DRIVE Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR Title DIRECTOR

NamePANTZER, EDWARDNameSCHLAGER, S. LAWRENCEAddress4847 DAVID S. MACK DRIVEAddress4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR EMERITUS Title DIRECTOR EMERITUS

Name SLIFKA, GILDA Name SILVERMAN YASHAR, LOIS

Address 4847 DAVID S. MACK DRIVE Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR EMERITUS Title PRESIDENT/CEO
Name BLOCH, BEATRICE Name MYERS, KEITH

Address 4847 DAVID S. MACK DRIVE Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR Title DIRECTOR

Name SIRULNICK, SANFORD

Name SHARF, JEAN
Address 4847 DAVID S. MACK DRIVE
Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR Title DIRECTOR

Name FRIEDMAN, SUSAN Name GOLDSMITH, RONI

Address 4847 DAVID S. MACK DRIVE Address 4847 DAVID S. MACK DRIVE

City-State-Zip: WEST PALM BEACH FL 33417