## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H64825

Entity Name: AMISUB (NORTH RIDGE HOSPITAL,) INC.

1445 ROSS AVE **SUITE 1400** DALLAS, TX 75202

**Current Principal Place of Business:** 

**FILED** Apr 01, 2019 **Secretary of State** 6364455170CC

## **Current Mailing Address:**

1445 ROSS AVE **SUITE 1400** DALLAS, TX 75202 US

FEI Number: 95-3982366 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.

Title

Name

Address

City-State-Zip:

SIGNATURE:

Title

Address

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

Title S

MACK, KRISTINA A Name

Address 1445 ROSS AVE

**SUITE 1400** 

DALLAS TX 75202 City-State-Zip:

TREASURER, DIRECTOR

SNYDER, JAMES E III Name

> 1445 ROSS AVE **SUITE 1400**

DALLAS TX 75202 City-State-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRISTINA A. MACK

**SECRETARY** 

**PRESIDENT** 

RABE, DOUGLAS E.

DALLAS TX 75202

1445 ROSS AVE

**SUITE 1400** 

04/01/2019