

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000103553

**Entity Name:** CHRISTIAN HOSPITAL SRO DEVELOPMENT, INC.

**Current Principal Place of Business:**

1603 NW 7 AVENUE  
MIAMI, FL 33136

**Current Mailing Address:**

1603 NW 7 AVENUE  
MIAMI, FL 33136 US

**FEI Number:** 65-0880565

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FITZGERALD, J PATRICK  
J. PATRICK FITZGERALD & ASSOCIATES, P.A.  
110 MERRICK WAY, SUITE3-B  
CORAL GABLES, FL 33134 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:** J PATRICK FITZGERALD

05/01/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FERNANDEZ, HILDA M  
Address 1603 NW 7 AVENUE  
City-State-Zip: MIAMI FL 33136

Title T  
Name OMANE-ACHAMFOUR, BISMARCK  
Address 1603 NW 7 AVENUE  
City-State-Zip: MIAMI FL 33136

Title S  
Name MOORE, RICHARD  
Address 680 NE 52 STREET  
City-State-Zip: MIAMI FL 33137

Title VP OF COMMUNITY INTERGRATION  
Name GIL, SAM  
Address 1603 NW 7 AVENUE  
City-State-Zip: MIAMI FL 33136

*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:** HILDA M. FERNANDEZ

P

05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date