2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001611

Entity Name: ROGERS MEMORIAL HOSPITAL INCORPORATED

FILED Apr 17, 2018 **Secretary of State** CC2993881803

Current Principal Place of Business:

34700 VALLEY ROAD OCONOMOWOC, WI 53066

Current Mailing Address:

34700 VALLEY ROAD OCONOMOWOC, WI 53066

FEI Number: 39-1139101 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STUEBER, ARNOLD 2002 NORTH LOIS AVENUE, STE 400 TAMPA, FL 33607 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: ARNOLD STUEBER 04/17/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

BOARD MEMBER

Title

Title	BOARD SECRETARY	Title	BOARD VICE-CHAIR
Name	PANZER, MARY E	Name	MOHR, MARK W
Address	34700 VALLEY ROAD	Address	34700 VALLEY ROAD
City-State-Zip:	OCONOMOWOC WI 53066	City-State-Zip:	OCONOMOWOC WI 53066

Title **PRESIDENT**

Name HAMMER, PATRICK T Name ANDRITSCH, PATRICK Address 34700 VALLEY ROAD Address 34700 VALLEY ROAD OCONOMOWOC WI 53066 City-State-Zip: City-State-Zip: OCONOMOWOC WI 53066

Title **BOARD TREASURER** Title **BOARD CHAIR**

Name BAUER, NICK Name SCHMIDT . CALVIN

Address 34700 VALLEY ROAD Address 34700 VALLEY ROAD

City-State-Zip: OCONOMOWOC WI 53066 OCONOMOWOC WI 53066 City-State-Zip:

Title **BOARD MEMBER** Title **BOARD MEMBER** Name BORELL, MARTIN BADER, DANIEL Name 34700 VALLEY ROAD Address 34700 VALLEY ROAD Address City-State-Zip: OCONOMOWOC WI 53066 OCONOMOWOC WI 53066 City-State-Zip:

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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: ARNOLD STUEBER **CFO**

Electronic Signature of Signing Officer/Director Detail

04/17/2018 Date

Officer/Director Detail Continued:

Title BOARD MEMBER Title BOARD MEMBER

Name KUBLY FRITZ, MOLLY Name MARKSON MAGNUS, GINA DVM

Address 34700 VALLEY ROAD Address 34700 VALLEY ROAD

City-State-Zip: OCONOMOWOC WI 53066 City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER Title BOARD MEMBER

Name MEANS, DEMOND A EDD Name RIEMANN, BRADLEY C PHD

Address 34700 VALLEY ROAD Address 34700 VALLEY ROAD

City-State-Zip: OCONOMOWOC WI 53066 City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER Title BOARD MEMBER

Name STAPLETON, MAUREEN Name WERTZ, JONATHAN JD, RN

Address 34700 VALLEY ROAD Address 34700 VALLEY ROAD

City-State-Zip: OCONOMOWOC WI 53066 City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER Title BOARD MEMBER

Name FLANAGAN, KEVIN Name HALVERSON, JERRY MD

Address 34700 VALLEY ROAD Address 34700 VALLEY ROAD

City-State-Zip: OCONOMOWOC WI 53066 City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER Title CFO

NameSEYMOUR, KRISTINENameSTUEBER, ARNOLDAddress34700 VALLEY ROADAddress34700 VALLEY ROAD

City-State-Zip: OCONOMOWOC WI 53066