

2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001611

Entity Name: ROGERS MEMORIAL HOSPITAL INCORPORATED**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:**REGISTERED AGENTS INC.
7901 4TH STREET NORTH
SUITE300
ST. PETERSBURG, FL 33702 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:** BILL HAVRE

03/06/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VC
Name GORMACKI, BARB
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

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

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

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

Title BOARD MEMBER
Name FLANAGAN, KEVIN
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title TREASURER
Name FITZPATRICK, CHRISTOPHER
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER
Name HAMMER, PATRICK
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER
Name HALVERSON, JERRY
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

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: ARNOLD STUEBER

CFO

03/06/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title BOARD MEMBER
Name MARKSON MAGNUS, GINA
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER
Name RIEMANN, BRADLEY
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title CFO
Name STUEBER, ARNOLD
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER
Name OLSON, BOB
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title SECRETARY
Name MULLIGAN, BILL
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER
Name STAPLETON, MAUREEN
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER
Name WILLIAMS-KEMP, KAMILAH
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066

Title BOARD MEMBER
Name ZABAWA, BARBARA
Address 34700 VALLEY ROAD
City-State-Zip: OCONOMOWOC WI 53066