

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000004991

**Entity Name:** ALLINA HEALTH SYSTEM, INC.**Current Principal Place of Business:**ALLINA HEALTH  
2925 CHICAGO AVENUE  
MINNEAPOLIS, MN 55407**Current Mailing Address:**ALLINA HEALTH  
2925 CHICAGO AVENUE  
MINNEAPOLIS, MN 55407 US**FEI Number:** 36-3261413**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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** OFFICER: SENIOR VP, GENERAL  
COUNSEL AND SECRETARY TO THE  
ALLINA HEALTH SYSTEM BOARD OF  
DIRECTORS**Name** SMITH, ELIZABETH TRUESDELL JD,  
MPH**Address** ALLINA HEALTH  
2925 CHICAGO AVENUE**City-State-Zip:** MINNEAPOLIS MN 55407**Title** DIRECTOR**Name** AHRENS, CLAY**Address** ALLINA HEALTH  
2925 CHICAGO AVENUE**City-State-Zip:** MINNEAPOLIS MN 55407**Title** DIRECTOR**Name** BALLARD, SHARI**Address** ALLINA HEALTH  
2925 CHICAGO AVENUE**City-State-Zip:** MINNEAPOLIS MN 55407**Title** DIRECTOR**Name** GILLUND, LAURA**Address** ALLINA HEALTH  
2925 CHICAGO AVENUE**City-State-Zip:** MINNEAPOLIS MN 55407**Title** OFFICER: EXECUTIVE VP, CHIEF  
FINANCIAL OFFICER AND  
TREASURER TO THE ALLINA HEALTH  
SYSTEM BOARD OF DIRECTORS**Name** MAGNUSON, RIC**Address** ALLINA HEALTH  
2925 CHICAGO AVENUE**City-State-Zip:** MINNEAPOLIS MN 55407**Title** DIRECTOR**Name** ALSTAD, JENNIFER**Address** ALLINA HEALTH  
2925 CHICAGO AVENUE**City-State-Zip:** MINNEAPOLIS MN 55407**Title** DIRECTOR**Name** CHURCH, JOHN**Address** ALLINA HEALTH  
2925 CHICAGO AVENUE**City-State-Zip:** MINNEAPOLIS MN 55407**Title** DIRECTOR**Name** HANG, MAYKAO**Address** ALLINA HEALTH  
2925 CHICAGO AVENUE**City-State-Zip:** MINNEAPOLIS MN 55407**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:** ELIZABETH TRUESDELL SMITH, JD, MPHSENIOR VP, GENERAL  
COUNSEL AND  
SECRETARY

01/11/2024

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KING II, LOUIS  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name LOWE, CHALLIS  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name O'LAUGHLIN, M.D., DAN  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name RONNEBERG, AMY  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name SCHREIER, THOMAS  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name ULREICH, SHAWN  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name BUTTS WILLIAMS, PH.D., BARBARA  
Address ALLINA HEALTH  
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City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name SHANNON, LISA  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name KUPLIC, DAVID  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name MITAU, LEE  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name RASMUSEN, VICKI  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR / CHAIR  
Name SCHONEMAN, DEBBRA  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name TUKUA, DARRELL  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR / VICE CHAIR  
Name WELSH, TIM  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407

Title DIRECTOR  
Name WILLIAMS-BRINKLEY, RUTH  
Address ALLINA HEALTH  
2925 CHICAGO AVENUE  
City-State-Zip: MINNEAPOLIS MN 55407