

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000001922

Entity Name: INDIANA UNIVERSITY HEALTH BALL MEMORIAL PHYSICIANS, INC.

FILED
Jul 19, 2021
Secretary of State
6604263948CC

Current Principal Place of Business:

340 WEST 10TH STREET
INDIANAPOLIS, IN 46202

Current Mailing Address:

340 WEST 10TH STREET
INDIANAPOLIS, IN 46202 US

FEI Number: 35-1925641

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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 DIRECTOR
Name PEIPERT, MD, PHD, JEFFREY F.
Address 550 N. UNIVERSITY BLVD., UH 2440
City-State-Zip: INDIANAPOLIS IN 46202

Title DIRECTOR
Name SHAH, MD, HIM
Address 550 N. UNIVERSITY BLVD, SUITE UH
0663
City-State-Zip: INDIANAPOLIS IN 46202

Title DIRECTOR
Name TIMMONS, MD, PHD, FACS, FAANS,
SHELLY
Address 355 W. 16TH STREET, SUITE 5100
City-State-Zip: INDIANAPOLIS IN 46202

Title VP OF FINANCE AND CONTROLLER
Name HUESING, JOHN
Address 340 WEST 10TH STREET
City-State-Zip: INDIANAPOLIS IN 46202

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: JOHN HUESING

**VP OF FINANCE AND
CONTROLLER**

07/19/2021

Electronic Signature of Signing Officer/Director Detail

Date