### 2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000000251

**Entity Name: SUTTER BAY MEDICAL FOUNDATION CORPORATION** 

FILED
Apr 23, 2024
Secretary of State
5802886201CC

# **Current Principal Place of Business:**

2000 POWELL STREET 10TH FLOOR

EMERYVILLE, CA 94608

## **Current Mailing Address:**

2200 RIVER PLAZA DRIVE 3RD FLR

SACRAMENTO, CA 95833 US

FEI Number: 94-1156581 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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: ASHLEY ISBERT, ASSISTANT VP

04/23/2024

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PRESIDENT Title SECRETARY

Name SMITH MD, TODD Name BROWN, GREGORY L

Address 2000 POWELL STREET 10TH FLOOR Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608 City-State-Zip: EMERYVILLE CA 94608

Title TREASURER Title CHAIRMAN

Name IYER, RAJU Name FLOWERS, ERIC

Address 2000 POWELL STREET 10TH FLOOR Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608 City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR Title DIRECTOR

Name BRIODY, THOMAS Name BRUNETTI, WILLIAM

Address 2000 POWELL STREET 10TH FLOOR Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608 City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR Title DIRECTOR

Name KACHER COBB, MD, JILL Name KWAN-FEINBERG MD, RITA

Address 2000 POWELL STREET 10TH FLOOR Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608 City-State-Zip: EMERYVILLE CA 94608

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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: GREGORY L. BROWN

**SECRETARY** 

04/23/2024

## Officer/Director Detail Continued:

Title DIRECTOR

Name DEIKEL, THEODORE

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR

Name MAXWORTHY DNP, JULI

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR
Name SEVCO, MARK

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR
Name RYAN, JOHN

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR

Name SCHAFFER, ARNIE

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR

Name SMITH MD, TODD

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR

Name GARUFIS, JANET

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR

Name NAKAGAWA PHD, YUMI

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR

Name RICHARDSON, YVONNE

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR

Name SINHA MD, RON

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608

Title DIRECTOR

Name VARNER MD, JANE

Address 2000 POWELL STREET 10TH FLOOR

City-State-Zip: EMERYVILLE CA 94608