

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003009

Entity Name: CHILDREN'S HEARTLINK, CORPORATION**Current Principal Place of Business:**5075 ARCADIA AVENUE
MINNEAPOLIS, MN 55436**Current Mailing Address:**5075 ARCADIA AVENUE
MINNEAPOLIS, MN 55436 US**FEI Number:** 41-1307457**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS INC
7901 4TH STREET NORTH
SUITE 300
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, SECRETARY

04/22/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name PAGE, HEATHER HUDNUT
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title VC
Name EVANSON, JEFF
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title SECRETARY
Name SMITH, DANNETTE
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title TREASURER
Name STONEKING, PATRICK
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title MEDICAL DIRECTOR
Name DEARANI, JOSEPH
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title MEDICAL DIRECTOR
Name OVERMAN, DAVID
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name BASTIAENS, GUILLAUME
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name HAAN, JEFF
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

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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: JACKIE BOUCHER

PRESIDENT

04/22/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HERCHUK, JANNIE
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name KISER, JOSEPH
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name O'LEARY, MICHAEL
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name STEIN, KENNETH
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR, PRESIDENT
Name BOUCHER, JACKIE
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name JOLLIE, TOM
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name NELSON, ANDREW F.
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name ROSENBAUM, BOB
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436

Title DIRECTOR
Name SWEENEY, ELIZABETH PERLICH
Address 5075 ARCADIA AVENUE
City-State-Zip: MINNEAPOLIS MN 55436