

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000004035

Entity Name: YALE NEW HAVEN HEALTH SERVICES CORPORATION

Current Principal Place of Business:

789 HOWARD AVE
NEW HAVEN, CT 06519

Current Mailing Address:

789 HOWARD AVE
NEW HAVEN, CT 06519 US

FEI Number: 22-2529464

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: APRIL MILLER

04/30/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY, TRUSTEE
Name CRESPO, JOSEPH R
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TREASURER, TRUSTEE, CHAIRMAN
Name TAMMARO, VINCENT
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title PRESIDENT
Name O'CONNOR, CHRISTOPHER
Address 99 HAWLEY LANE
City-State-Zip: STRAFORD CT 06614

Title TRUSTEE
Name SUSSMAN MD, ELLIOT J.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name SALOVEY, PETER
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name REUBEN, MEREDITH B.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name KETCHUM, THOMAS B.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name TORGERSON, JAMES P.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH R. CRESPO

SECRETARY

04/30/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name HIGHSMITH, CARLTON L.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name FALCONI, JOHN
Address 267 GRANT STREET
City-State-Zip: BRIDGEPORT CT 06610

Title CEO, TRUSTEE
Name BORGSTOM, MARNA
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name CALLAHAN, JACK JR.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name CUNNINGHAM, JOCELYN
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name BERKLEY, W. ROBERT JR.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name LORIMER, LINDA
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name LAHEY, JOHN
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE, VC
Name FARRELL, MARY C.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name MITCHELL, JAMES
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name STROBEL, SCOTT
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name HLLANDER, AARON
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title TRUSTEE
Name RAUH, B. MICHAEL
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519

Title ASSISTANT SECRETARY
Name ASELTYN, WILLIAM J. ESQ.
Address 789 HOWARD AVE
City-State-Zip: NEW HAVEN CT 06519