

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000002642

**FILED**  
**Mar 30, 2022**  
**Secretary of State**  
**2884050140CC**

**Entity Name:** SANFORD MEDICAL CENTER, INC.

**Current Principal Place of Business:**

1305 W. 18TH STREET  
SIOUX FALLS, SD 57105

**Current Mailing Address:**

1305 W. 18TH STREET  
SIOUX FALLS, SD 57105 US

**FEI Number:** 46-0227855

**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 JACOBS, DON  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title DIRECTOR  
Name TEIKEN, BRENT  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title DIRECTOR  
Name HOCKS, MATT  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title SECRETARY/TREASURER  
Name GUFFIN, BECKY  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title DIRECTOR  
Name ENTENMAN, JIM  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title DIRECTOR  
Name HANSON, PAUL  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title PRESIDENT  
Name HANSON, PAUL  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TRUSTEE  
Name TEIKEN, BRENT  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

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

**SIGNATURE:** NORTH, ANDREW

**SECRETARY**

**03/30/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name PAULSON, MARK, MD  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TRUSTEE  
Name GULSVIG, NEIL L.  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TRUSTEE  
Name BELL, MARIA MD  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title CHAIRPERSON  
Name ENTENMAN, JIM  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TRUSTEE  
Name MOLBERT, LAURIS  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title CHAIR PERSON, TRUSTEE  
Name GULSVIG, NEIL L.  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title DIRECTOR  
Name HERRMANN, , MARNIE  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TREASURER  
Name SMITH, , ROBIN  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TRUSTEE  
Name LUNDEEN, MARK, MD  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TRUSTEE  
Name CAIN, JAMES  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title SECRETARY/TREASURER  
Name GUFFIN, BECKY  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TRUSTEE  
Name SMITH, ROBIN  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title TRUSTEE  
Name GASSEN, BILL  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title DIRECTOR  
Name ENGBRECHT, , WESLEY  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title DIRECTOR  
Name NORTH, , ANDREW  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105

Title SECRETARY  
Name NORTH, , ANDREW  
Address 1305 W. 18TH STREET  
City-State-Zip: SIOUX FALLS SD 57105