## 2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F2200000301

Entity Name: TENET CORP

#### **Current Principal Place of Business:**

1100 OLD HIGHWAY 8 NW NEW BRIGHTON, MN 55112

#### **Current Mailing Address:**

1100 OLD HIGHWAY 8 NW NEW BRIGHTON, MN 55112 US

#### FEI Number: 87-2908533

#### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US Certificate of Status Desired: No

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

#### Officer/Director Detail :

Title	ASST TREASURER	Title	DIRECTOR
Name	HATFIELD, SCOTT	Name	BECKER, RUSSELL A.
Address	1100 OLD HIGHWAY 8 NW	Address	1100 OLD HIGHWAY 8 NW
City-State-Zip:	NEW BRIGHTON MN 55112	City-State-Zip:	NEW BRIGHTON MN 55112
Title	DIRECTOR	Title	PRESIDENT
Name	KRUMM, KEVIN	Name	LUCIA, TONY
Address	1100 OLD HIGHWAY 8 NW	Address	1100 OLD HIGHWAY 8 NW
City-State-Zip:	NEW BRIGHTON MN 55112	City-State-Zip:	NEW BRIGHTON MN 55112
Title	VP	Title	SECRETARY
Title Name	VP DUVAL, JASON	Title Name	SECRETARY FIKE, ANDREA M.
Name	DUVAL, JASON	Name	FIKE, ANDREA M.
Name Address	DUVAL, JASON 1100 OLD HIGHWAY 8 NW	Name Address	FIKE, ANDREA M. 1100 OLD HIGHWAY 8 NW
Name Address City-State-Zip:	DUVAL, JASON 1100 OLD HIGHWAY 8 NW NEW BRIGHTON MN 55112	Name Address City-State-Zip:	FIKE, ANDREA M. 1100 OLD HIGHWAY 8 NW NEW BRIGHTON MN 55112
Name Address City-State-Zip: Title	DUVAL, JASON 1100 OLD HIGHWAY 8 NW NEW BRIGHTON MN 55112 CONTROLLER	Name Address City-State-Zip: Title	FIKE, ANDREA M. 1100 OLD HIGHWAY 8 NW NEW BRIGHTON MN 55112 TREASURER
Name Address City-State-Zip: Title Name	DUVAL, JASON 1100 OLD HIGHWAY 8 NW NEW BRIGHTON MN 55112 CONTROLLER MCELMURRY, DANIEL	Name Address City-State-Zip: Title Name	FIKE, ANDREA M. 1100 OLD HIGHWAY 8 NW NEW BRIGHTON MN 55112 TREASURER BETTMANN, KRISTEN 1100 OLD HIGHWAY 8 NW

## 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: SCOTT HATFIELD

ASST TREASURER

04/05/2022

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 05, 2022 Secretary of State 8489366807CC

Date

## **Officer/Director Detail Continued :**

Title	ASSISTANT TREASURER
Name	FRELS, HANNAH
Address	1100 OLD HIGHWAY 8 NW
City-State-Zip:	NEW BRIGHTON MN 55112