

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700442

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: DOCTORS HOSPITAL FOUNDATION, INC.

## Current Principal Place of Business:

6700 E TROPICAL WAY  
PLANTATION, FL 33317

## New Principal Place of Business:

6700 E TROPICAL WAY  
PLANTATION, FL 33317 US

## Current Mailing Address:

6700 E TROPICAL WAY  
PLANTATION, FL 33317

## New Mailing Address:

6700 E TROPICAL WAY  
PLANTATION, FL 33317 US

FEI Number: 59-0906961

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEGANCE, JOSEPH ESQUIRE  
3471 N. FEDERAL HWY  
FT. LAUDERDALE, FL 33306 US

## Name and Address of New Registered Agent:

GROSS, DONALD L PRES.  
6700 E. TROPICAL WAY  
PLANTATION, FL 33317 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: DONALD L GROSS

01/07/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GROSS, DONALD L  
Address: 6700 E TROPICAL WAY  
City-St-Zip: PLANTATION, FL 33317

Title: DC ( ) Delete  
Name: PERRAUD, ROBERT L  
Address: 2541 SW 50TH BLVD  
City-St-Zip: GAINESVILLE, FL 32608

Title: DST ( ) Delete  
Name: NEER, HOWARD L  
Address: 5840 SW 8 ST  
City-St-Zip: PLANTATION, FL 33317

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GROSS, DONALD L TRUSTEE  
Address: 6700 E TROPICAL WAY  
City-St-Zip: PLANTATION, FL 33317 US

Title: DC (X) Change ( ) Addition  
Name: PERRAUD, ROBERT L TRUSTEE  
Address: 2541 SW 50TH BLVD  
City-St-Zip: GAINESVILLE, FL 32608 US

Title: DST (X) Change ( ) Addition  
Name: NEER, HOWARD L TRUSTEE  
Address: 5840 SW 8 ST  
City-St-Zip: PLANTATION, FL 33317 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONALD L. GROSS

PRES

01/07/2008

Electronic Signature of Signing Officer or Director

Date