## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 703100** 

703100 Secretary of State

Entity Name: WINTER HAVEN HOSPITAL, INC.

Current Principal Place of Business: New Principal Place of Business:

200 AVENUE F NORTHEAST WINTER HAVEN, FL 33881 US

Current Mailing Address: New Mailing Address:

200 AVENUE F NORTHEAST WINTER HAVEN, FL 33881 US

FEI Number: 59-0724462 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ANASTASIO, LANCE CEO
200 AVENUE F NORTHEAST
WINTER HAVEN, FL 33881 US
ANASTASIO, LANCE CEO
200 AVENUE F NORTHEAST
WINTER HAVEN, FL 33881 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: LANCE ANASTASIO 02/26/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FILED Feb 26, 2009

 Title:
 S
 () Delete
 Title:
 C
 (X) Change () Addition

 Name:
 MURRELL, WILLIAM H
 Name:
 MCPHERSON, CHARLES W

 Address:
 P.O.BOX 832 MOUNTAIN LAKE
 Address:
 309 QUAILS RUN PASS

 City-St-Zip:
 LAKE WALES, FL 338590832
 City-St-Zip:
 WINTER HAVEN, FL 33884

Title: AS ( ) Delete Title: 1VC (X) Change ( ) Addition Name: DANTZLER, TODD Name: SWAIN, BRIAN K

Address: 1601 6TH STREET SE Address: 400 AVE K, SE, SUITE #3
City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: WINTER HAVEN, FL 33885

Title: T ( ) Delete Title: 2VC (X) Change ( ) Addition Name: INGRAM, DON Name: BOSTICK, MARK

Address: 7 HICKORY WAY Address: 169 LAKE OTIS ROAD
City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: WINTER HAVEN, FL 33884

Title: 2VC ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 SWAIN, BRIAN K
 Name:
 OAKLEY, TOMMY

 Address:
 P.O. BOX 3096
 Address:
 124 WYNDHAM DR

 City-St-Zip:
 WINTER HAVEN, FL 33885
 City-St-Zip:
 WINTER HAVEN, FL 33884

Title: C ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 CARTER, ROBERT
 Name:
 INGRAM, DON

 Address:
 1312 MIRROR TERRACE NW
 Address:
 7 HICKORY WAY

City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: WINTER HAVEN, FL 33884

Title: ( ) Delete Title: (X) Change ( ) Addition MCPHERSON, CHARLES DANTZLER, TODD Name: Name: Address: 309 QUAILS RUN PASS Address: 801 PIEDMONT DR SE WINTER HAVEN, FL 33884 City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip:

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: LANCE ANASTASIO CEO 02/26/2009