

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705164

FILED
Jan 19, 2011
Secretary of State

Entity Name: BROWARD GENERAL MEDICAL CENTER AUXILIARY OF FORT LAUDERDALE, FLORIDA, INC.

Current Principal Place of Business:

1600 S ANDREWS AVE
FT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

1600 S ANDREWS AVE
FT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 59-0895145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOLES, JUDY PRESIDE
3001 SW 18 TH TER.
#4
FORT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

PATTERSON, ROZEN PRESIDE
3001 SW 18 TH TER.
#4
FORT LAUDERDALE, FL 33315 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: SUAD BEGOVIC

01/19/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: 2VP
Name: MORRIS, ZELLENE
Address: 7411 SW 14TH STREET
City-St-Zip: PLANTATION, FL 33317

Title: P
Name: PATTERSON, ROZEN
Address: 3001 SW 18 TH TER., #4
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: SECR
Name: BRADY, MYKEN
Address: 505 E. DANIA BEACH BLVD. #4 E
City-St-Zip: DANIA BEACH, FL 33004

Title: 1VP
Name: DANKER, JAN
Address: 3000 NE 16TH AVE., D209
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: 3 VP
Name: JANSON, AUDREY
Address: 1016 MANGO ISLE
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: T
Name: VAUGHN, REGIS
Address: 26 SE 11TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33301

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

SIGNATURE: SUAD BEGOVIC

MANA

01/19/2011

Electronic Signature of Signing Officer or Director

Date