

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 707629

FILED
Nov 21, 2005
Secretary of State

Entity Name: SOUTH FLORIDA HOSPITAL AND HEALTHCARE ASSOCIATION, INC.

Current Principal Place of Business:

6363 TAFT STREET
SUITE 200
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

63630 TAFT STREET
SUITE 200
HOLLYWOOD, FL 33024 US

New Mailing Address:

FEI Number: 59-0979494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUICK, LINDA S
6363 TAFT STREET
SUITE 200
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

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: LINDA S. QUICK

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: QUICK, LINDA S
Address: 6363 TAFT STREET, #200
City-St-Zip: HOLLYWOOD, FL 33024

Title: C () Delete
Name: STANSBERRY, DAVID
Address: 1475 NW 12TH AVENUE, #4037
City-St-Zip: MIAMI, FL 33136

Title: D () Delete
Name: FERNANDEZ, AURELIO
Address: 5000 WEST OAKLAND PARK BLVD.
City-St-Zip: FT LAUDERDALE, FL 33313

Title: TD () Delete
Name: GREENBERG, PATRICIA
Address: 999 PONCE DE LEON BLVD. #950
City-St-Zip: CORAL GABLES, FL 33176

Title: S () Delete
Name: CRUICKSHANK, JAMES
Address: 7201 N. UNIVERSITY DRIVE
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: CARBONE, DAVIDE
Address: 20900 BISCAYNE BLVD
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LINDA S. QUICK

P

11/21/2005

Electronic Signature of Signing Officer or Director

Date