

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709578

**FILED**  
**Mar 15, 2012**  
**Secretary of State**

**Entity Name:** GLADES GENERAL HOSPITAL AUXILIARY, INC.

**Current Principal Place of Business:**

39200 HOOKER HIGHWAY  
BELLE GLADE, FL 33430

**New Principal Place of Business:**

**Current Mailing Address:**

39200 HOOKER HIGHWAY  
BELLE GLADE, FL 33430

**New Mailing Address:**

**FEI Number:** 59-2811993

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOODSON, GLENDA C TREAS  
39200 HOOKER HIGHWAY  
BELLE GLADE, FL 33430 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BURKE, MARY FRANCES  
**Address:** 2740 NW 16TH ST  
**City-St-Zip:** BELLE GLADE, FL 33430

**Title:** VD1  
**Name:** PHILLIPS, SARA N  
**Address:** 609 SE 12TH ST  
**City-St-Zip:** BELLE GLADE, FL 33430

**Title:** VD2  
**Name:** SMITH, NANCY  
**Address:** 1740 S.E. AVENUE K  
**City-St-Zip:** BELLE GLADE, FL 33430

**Title:** TD  
**Name:** GOODSON, GLENDA C  
**Address:** 14830 U.S. 441 NORTH  
**City-St-Zip:** CANAL POINT, FL 33438

**Title:** RSD  
**Name:** THOMPSON, JANE  
**Address:** 1040 SE 3RD ST  
**City-St-Zip:** BELLE GLADE, FL 33430

**Title:** CSD  
**Name:** WESTCARTH, ENA  
**Address:** 201 NW14TH ST  
**City-St-Zip:** BELLE GLADE, FL 33430

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:** GLENDA C. GOODSON

TD

03/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date