

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90289 001 \*1,185.00

**DOCUMENT # 715198**

1. Entity Name

**GOOD SAMARITAN HOSPITAL, INC.**

Principal Place of Business

**1309 NORTH FLAGLER DRIVE  
 WEST PALM BEACH FL 33402**

Mailing Address

**1309 NORTH FLAGLER DRIVE  
 WEST PALM BEACH FL 33402**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-0651088**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LARCOMBE, VALERIE G ESQ  
 AKERMAN SENTERFITT  
 777 S. FLAGLER DRIVE  
 WEST PALM BEACH FL 33401**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NATHAN, STEVEN 1309 NORTH FLAGLER DRIVE WEST PALM BEACH FL 33401	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD WILLIAM K CALER JR 1309 NORTH FLAGLER DRIVE WEST PALM BEACH FL 33402	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SNED, WILLIAM JR 1309 NORTH FLAGLER DRIVE WEST PALM BEACH FL 33402	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LOSCALZO, STEVEN 1309 NORTH FLAGLER DRIVE WEST PALM BEACH FL 33401	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOODWIN, VALERIE G 1309 NORTH FLAGLER DRIVE WEST PALM BEACH FL 33402	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Robert V. Stanek 1309 N. Flagler Drive West Palm Beach, FL 33401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD Marvin H. Schur 1309 N. Flagler Drive West Palm Beach, FL 33401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Sr. Gladys Sharkey 1309 N. Flagler Drive West Palm Beach, FL 33401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Michael Loscalzo	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Valerie G. Larcombe 1309 N. Flagler Drive West Palm Beach, FL 33401	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

CR2E037 (10/00)

**GOOD SAMARITAN HOSPITAL, INC.  
BOARD OF GOVERNORS  
2000-2001**

*Attachment  
# 715198  
72271*

**OFFICERS:**

Sister Gladys Sharkey, OSF, Chairman  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Marvin H. Schur, Vice Chairman  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Robert Stanek, President & CEO  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Valerie Goodwin Larcombe, Secretary  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Michael Loscalzo, Treasurer  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

**BOARD MEMBERS:**

David Dodson, M.D., Chief of Staff  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Denis M. Murphy, M.D.  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Jordan C. Grabel, M.D.  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

David B. Rinker  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Sister Mary McNally, OSF  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Lewis M. Schott  
1309 N. Flagler Drive  
West Palm Beach, FL 33401

Jon C. Moyle  
1309 N. Flagler Drive  
West Palm Beach, FL 33401