


FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90236 033 ****61.25

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 715328			
1. Entity Name ST. JOSEPH'S HOSPITAL AUXILIARY, INCORPORATED			
Principal Place of Business 3001 WEST M L K BLVD TAMPA, FL 33607		Mailing Address ATTN: ISAAC MALLAH 3001 W. DR. MLD BLVD TAMPA, FL 33607 US	
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 59-2131207		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MALLAH, ISAAC 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607		7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOOLDRIGE, MARY <input type="checkbox"/> Delete 3001 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33607	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE LONG, MARY <input type="checkbox"/> Delete 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHEESLEY, JOYCE <input type="checkbox"/> Delete 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEFANIK, ADELAIDE <input checked="" type="checkbox"/> Delete 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WHITNEY, LUELLA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLACKBURN, TOM <input checked="" type="checkbox"/> Delete 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHELTON, BONNIE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT LONG, BOB <input type="checkbox"/> Delete 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607	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 exemptions contained 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 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: <u>Isaac Mallah</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4-35-06 (413) 870-4020 <small>Date Daytime Phone #</small>	

ATTACHMENT

40084692

#715326

ST. JOSEPH'S HOSPITAL AUXILIARY, INCORPORATED
2006 UNIFORM BUSINESS REPORT
ADDITIONAL OFFICERS/DIRECTORS

(D)

Blackburn, Tom
3001 W. Dr. Martin Luther King Jr. Blvd.
Tampa, FL 33607

(Recording Secretary)

Commack, Linda
3001 W. Dr. Martin Luther King Jr. Blvd.
Tampa, FL 33607

(D)

Dahl, Doug
3001 W. Dr. Martin Luther King Jr. Blvd.
Tampa, FL 33607

(D)

Gonzalez, Helen
3001 W. Dr. Martin Luther King Jr. Blvd.
Tampa, FL 33607

(D)

Hammeken, Sandra
3001 W. Dr. Martin Luther King Jr. Blvd.
Tampa, FL 33607

(D)

Ponichtera, Angie
3001 W. Dr. Martin Luther King Jr. Blvd.
Tampa, FL 33607

(D) (Nominating Chairman)

Vazquez, Nina
3001 W. Dr. Martin Luther King Jr. Blvd.
Tampa, FL 33607

(D)

Ytuarte, Raymond
3001 W. Dr. Martin Luther King Jr. Blvd.
Tampa, FL 33607