

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724553

FILED
Jan 24, 2011
Secretary of State

Entity Name: IMPERIAL POINT HOSPITAL AUXILIARY, INC.

Current Principal Place of Business:

6401 N. FEDERAL HWY
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

6401 N. FEDERAL HWY
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-1844069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, ELDEN J
IMPERIAL POINT HOSPITAL AUX.
6401 N. FEDERAL HWY
FORT LAUDERDALE, FL 33308 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: KEEGAN, JOCELYN MRS.
Address: 278 S.E. 4TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: TD
Name: JOHNSON, ELDEN MR
Address: 106 LAKE EMERALD DRIVE
City-St-Zip: OAKLAND PARK, FL 33309

Title: VD
Name: ELDEN, JOHNSON MR.
Address: 106 EMERALD DRIVE
City-St-Zip: OAKLAND PARTK, FL 33309

Title: SD
Name: INGLIS, LAURA MS.
Address: 3472 N E 18TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33306

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: ELDEN JOHNSON

TRES

01/24/2011

Electronic Signature of Signing Officer or Director

Date