

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728413

FILED
Jan 07, 2009
Secretary of State

Entity Name: SEBASTIAN RIVER MEDICAL CENTER AUXILIARY, INC.

Current Principal Place of Business:

13695 US HIGHWAY 1
P.O. BOX 780838
SEBASTIAN, FL 32978

New Principal Place of Business:

13695 US HIGHWAY 1
SEBASTIAN, FL 32978

Current Mailing Address:

13695 US HIGHWAY 1
P.O. BOX 780838
SEBASTIAN, FL 32978

New Mailing Address:

13695 US HIGHWAY 1
SEBASTIAN, FL 32978

FEI Number: 59-2403865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, RITA
781 COLLIER CLUB RD
SEBASTIAN, FL 32958 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: P () Delete
Name: OWENS, RITA
Address: 781 COLLIER CLUB RD
City-St-Zip: SEBASTIAN, FL 32958

Title: VP () Delete
Name: POWELL, LORI
Address: 317 AVACADO DR
City-St-Zip: SEBASTIAN, FL 32976

Title: D () Delete
Name: GIEL, DEE
Address: 19 SUNSET DRIVE
City-St-Zip: SEBASTIAN, FL 32958

Title: T () Delete
Name: HARRIS, SHIRLEY
Address: 861 DALE CIRCLE
City-St-Zip: SEBASTIAN, FL 32958

Title: S () Delete
Name: SUTHERLAND, YVONNE
Address: 1327 KIWI DR
City-St-Zip: SEBASTIAN, FL 32976

Title: D () Delete
Name: RAND, PAUL
Address: 1216 CALUSA DR
City-St-Zip: SEBASTIAN, FL 32976

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: GIEL, DOROTHY
Address: 19 SUNSET DR
City-St-Zip: SEBASTIAN, FL 32958

Title: D (X) Change () Addition
Name: MCCUEN, SANDRA
Address: 9777 RIVERVIEW DR
City-St-Zip: MICCO, FL 32976

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

Title: S (X) Change () Addition
Name: ROHLFS, DIANA
Address: 920 CYPRESS ST
City-St-Zip: BAREFOOT BAY, FL 32976

Title: D (X) Change () Addition
Name: RAND, PAUL
Address: 1216 CALUSA DR
City-St-Zip: BAREFOOT BAY, FL 32976

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RITA OWENS

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date