

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 735050

1. Entity Name

THE SARASOTA MEMORIAL HOSPITAL CENTURY FOUNDATIO

Principal Place of Business

1838 WALDEMERE ST
SARASOTA FL 34239-2919

Mailing Address

1838 WALDEMERE ST
SARASOTA FL 34239-2919

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

51-0188568

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

BERTEAU, JOHN T. ESQ.
WILLIAMS PARKER HARRISON DIETZ & GETZEN
1550 RINGLING BLVD.
SARASOTA, FL 34236

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 TR ☐ Delete
NAME KOSKI, BEVERLY
STREET ADDRESS 5135 WILLOW LEAF DR
CITY-ST-ZIP SARASOTA FL 34241

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1838 Waldemere Street
CITY-ST-ZIP Sarasota, FL 34239

TITLE TR ☒ Delete
NAME DUNN, EDITH B.
STREET ADDRESS 740 PENFIELD ROAD
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME QUARLES, ALEXANDRA
STREET ADDRESS 1838 WALDEMERE STREET
CITY-ST-ZIP SARASOTA FL 34239

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TR ☐ Delete
NAME IVES, GEORGE S ESQ
STREET ADDRESS 1411 KIMLIRA LANE
CITY-ST-ZIP SARASOTA FL 34231

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1838 Waldemere Street
CITY-ST-ZIP Sarasota, FL 34239

TITLE CTR ☐ Delete
NAME TOWLER, THOMAS H
STREET ADDRESS 7306 POINT OF ROCKS RD
CITY-ST-ZIP SARASOTA FL 34242

TITLE TR ☒ Change ☐ Addition
NAME
STREET ADDRESS 1838 Waldemere Street
CITY-ST-ZIP Sarasota, FL 34239

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *AWARATI* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90198 041 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)