2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#742020

Apr 22, 2006 Secretary of State

Entity Name: THE PALM BEACH GARDENS MEDICAL CENTER AUXILIARY, INC.

Current Principal Place of Business: New Principal Place of Business:

3360 BURNS ROAD

PALM BEACH GARDENS, FL 33410 LIS

Current Mailing Address: New Mailing Address:

3360 BURNS ROAD

PALM BEACH GARDENS, FL 33410 US

FEI Number: 59-1791451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ENGSTROM, KARL W 300 BEACH ROAD #205

TEQUESTA, FL 33469 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition ACTION, MARGARET ACTION, MARGARET Name: Name:

5675 WHIRLAWAY ROAD Address: 5675 WHIRLAWAY ROAD Address:

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33418

(X) Change () Addition Title: VD () Delete Title: ENGSTROM, KARL Name: ENGSTROM, KARL Name:

Address: 300 BEACH ROAD APT 205 Address: 300 BEACH ROAD APT 205 City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: TEQUESTA, FL 33469

Title: PD () Delete Title: TD (X) Change () Addition

CLARK, P CARVER, JEAN Name: Name:

229 EAGLETON LAKES BLVD Address: Address: 8515 DOVERBROOK DRIVE City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33410

() Delete Title: ATD Title: ATD (X) Change () Addition

Name: BARNES, KAY Name: SAIGH, MARIE Address: 724 TEAL WAY Address: 105 EAGLETON LANE

City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: () Delete Title: VD (X) Change () Addition

ENGELSHER, SANDI COOK, GEORGE Name: Name: 124 EAGLETON LANE 117 LOST BRIDGE DRIVE Address: Address:

PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip:

Title: () Delete Title: (X) Change () Addition CARVEN, MARJORIE GAYNOR, JOHN Name: Name:

Address: 419 US HWY ONE, APT. 116 Address: 12792 WOODMILL DRIVE

NORTH PALM BEACH, FL 33408 PALM BEACH GARDENS, FL 33418 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KARL ENGSTROM PED 04/22/2006