2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#742020

FILED Jan 04, 2011 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 US

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 CARVER, JEAN R 300 BEACH ROAD 3360 BUŔNS ROAD

PALM BEACH GARDENS, FL 33410 US #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: JEAN R. CARVER 01/04/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

BERTOLINI, ANGE Name:

Address: 120 LEHANE TERRACE #101 City-St-Zip: NORTH PALM BEACH, FL 33408

Title:

Name: PARKS, EDITH Address: 2004 VISION DRIVE

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

Title: TD

CARVER, JEAN Name:

8515 DOVERBROOK DRIVE Address: City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ATD Name:

BARNES, KAY Address: 724 TEAL WAY

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

Title: RSD

ACTON, MARGARET Name: 107 SEDONA WAY Address:

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

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: JEAN R> CARVER TD 01/04/2011