NONPROFIT CORPORATION ANNUAL REPORT

1999



9. Name and Address of Current Registered Agent

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 756641

MUNDELL, THOMAS J

VENICE FL 34285-2900

540 THE RIALTO

THE HOSPITAL FOUNDATION	N, INC.	
Principal Place of Business	Mailing Address	
540 THE RIALTO VENICE FL 34285-2900 US	540 THE RAILTO VENICE FL 34285-2900 US	
Principal Place of Business 1	2a. Mailing Address 26 540 The Rialto	3. Date Incorporated or Qualifed 03/06/1981
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 59-2080629
City & State	City & State	5. Certifcate of Status Desired
Zip Country 24 25	Zip Country	Election Campaign Financing Trust Fund Contribution

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90127 014 ****61.25

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10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

	그는 그 1년 기육도로	84	City				85 Zip C	'ada				
	;					FL	• <u> </u>					
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.												
SIGNATURE	ALOTE D		e sion of		reinstating\	DATE						
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGE		ID DIRECTO	RS IN 12				
TITLE	VD DELETE	1.1 TITLE		. 1	7.0017.07.07.07		☐ Change	Addition				
		1.2 NAME						_				
NAME	MUDELL, THOMAS J			ا								
STREET ADDRESS	540 THE RIALTO	1.3 STREE		S								
CITY-ST-ZIP	VENICE FL 34285	1.4 CITY-S	T-ZIP	_			Change	☐ Addition				
TILE	TD DELETE	2.1 TITLE		}			[] Change	- Addition				
NAME	HALL, WAYNE C	2.2 NAME		ļ								
STREET ADDRESS	1505 TAMIAMI TR S	2.3 STREE	TADORES	s								
CITY-ST-ZIP	VENICE FL 34292	2. 4 CITY-5	T-ZIP_									
TITLE	C DELETE	3.1 TITLE					Change	☐ Addition				
NAME	TORREY, RICHARD F.	3.2 NAME										
STREET ADDRESS	705 CARNOUSTIE TERRACE	3.3 STREE	ADDRES	s								
CITY-ST-ZIP	VENICE FL	3.4. CITY-5	ST-ZIP									
TITLE	VC DELETE	4.1 TITLE		C			Change	☐ Addition				
NAME	LAWRENCE, GRANT	4. 2 NAME		-								
STREET ADDRESS	701 SHETLNAD CIRCLE	4.3 STREE	TADDRES	s 701	Shetland	Circle						
CITY-ST-ZIP	NOKOMIS, FL 0	4.4 CITY-S	T_ 7IP	'-'	TOCI CC	3427	4					
TITLE	SD DELETE	5.1 TITLE		-			☐ Change	Addition				
	MARKS, JANET	5.2 NAME										
NAME	900 TAMIAMI TR S APT 629	5.3 STREE	TADORES	s								
STREET ADDRESS		54 CITY-S		1								
CITY-ST-ZIP	VENICE FL	6.1 TITLE					[☐ Change	Addition				
TITLE		6.2 NAME					on any	ا العدد العد				
NAME	AZZONI, ALFRED		r a DDD==	اء				ĺ				
STREET ADDRESS	7520 MANASOTA KEY RD	6.3 STREE		8								
CITY-ST-ZIP	ENGLEWOOD FL 34223	6.4 CITY-S		11.0	440.07(B)(i) El :::	Otation 1 & makes	416 . 4h 4h !-	formation				
14. 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 annual report or 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 annual report or 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 annual report of 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 annual report of 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 annual report of 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 annual report of 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 annual report of the same legal effect as if made under oath; that I am an office or director of the corporation of the same legal effect as if made under oath; that I am an office or director of the corporation of the same legal effect as if made under oath; that I am an office or director of the corporation of the same legal effect as if made under oath; that I am an office or director of the corporation of the same legal effect as if made under oath; that I am an office or director of the corporation of the same legal effect as if made under oath; that I am an office or director of the corporation of the same legal effect as if made under oath; that I am an office or director of the corporation of the same legal e												

Name

83

SIGNATURE:

REQUIRED

Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

756641 53214690127:14

The Hospital Foundation Officers and Directors - Continued

D Shirley Case 323 Pembroke Drive Venice, FL 34293

D
Sally Gambling
PO Box 1126
Boca Grande, FL 33921

D Michael G. Guley 540 The Rialto Venice, FL 34285

D Letetia M. Mercier 508 N Indiana Ave. Englewood, FL 34223

D Donna Moore PO Box 1033 Boca Grande, FL 33921

D Richard M. Morrison PO Box 1072 Boca Grande, FL 33921

P/D Sister Mary Catherine Rogers 540 The Rialto Venice, FL 34285

D Gregory R. Shanika 625 Gardenia Dr Venice, FL 34285 D Ann Spaulding 476 Laurencin Drive Nokomis, FL 34275

D Gina Taylor 630 N River Road Venice, FL 34293

VC/D Nelda Thompson 6415 Manasota Key Rd Englewood, FL 34223

D Robert J. Tritschler 1437 Southbay Dr. Osprey, FL 34229

D Patty Wheeler PO Box 1534 Nokomis, FL 34274