2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State
04-28-2005 90167 016 ****70.00

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DOCUMENT # 762438

1. Entity Name
ST. LUKE'S HOSPITAL ASSOCIATION

Principal Place of Business	Mailing Address
4201 BELFORT ROAD JACKSONVILLE, FL 32216-2898	4201 BELFORT ROAD JACKSONVILLE, FL 32216-2898

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04132005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-0714831 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN, JOANNE L
4500 SAN PABLO ROAD
JACKSONVILLE, FL 32224

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
TD	HOFFMAN, MARY	4201 BELFORT RD	JACKSONVILLE, FL 32216	☐ Delete
CD	BARTLEY, GEORGE B MD	4500 SAN PABLO ROAD	JACKSONVILLE, FL 32216	☐ Delete
SD	MATHEWS, HILARY	4201 BELFORT RD.	JACKSONVILLE, FL	☐ Delete
PVCD	WALTERS, ROBERT M	4500 SAN PABLO RD.	JACKSONVILLE, FL	☐ Delete
D	HARMON, IRA MD	4201 BELFORT RD	JACKSONVILLE, FL 32216	☐ Delete
D	KUHLMAN, PETER MD	4201 BELFORT RD	JACKSONVILLE, FL 32216	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
* See Attached Additions *				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition

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: Robert M Walters 4/15/05 904-953-2146
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 14003435
#762438

2005 ANNUAL REPORT (FORMERLY UNIFORM BUSINESS REPORT)
ST. LUKE'S HOSPITAL ASSOCIATION

 # 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

Additions

D - Director
Brown, Leah
4201 Belfort Road
Jacksonville, FL 32216

D – Director
Burger, Charles, M.D.
4500 San Pablo Road
Jacksonville, FL 32224

D – Director
Cohen, Marc, M.D.
4500 San Pablo Road
Jacksonville, FL 32224

D – Director
Fulmer, Jack T., M.D.
4500 San Pablo Road
Jacksonville, FL 32224

D – Director
Gonwa, Thomas, M.D.
4500 San Pablo Road
Jacksonville, FL 32224

D – Director
Rebenack, Paul, M.D.
4201 Belfort Road
Jacksonville, FL 32216

D – Director
Williams, Hugh, M.D.
4500 San Pablo Road
Jacksonville, FL 32224