2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State
05-15-2001 90064 018 ****61.25

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DOCUMENT # 766554

1. Entity Name

MARTIN MEMORIAL HEALTH SYSTEMS, INC.

Principal Place of Business	Mailing Address
301 HOSPITAL AVE STUART FL 34994	PO BOX 9010 STUART FL 34995

975383

DO NOT WRITE IN THIS SPACE

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 59-2307522 ☐ 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
HARMAN, RICHMOND M. 301 HOSPITAL AVE STUART FL 34994	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CD WOODRUFF, ALAN J 3990 JOE'S POINT ROAD STUART FL 34996	☒ Delete	DVC CREECH, JILL 6856 SW WOODBINE WAY PALM CITY, FL 34990	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SWIFT, GEORGE H III 800 SE MONTEREY BLVD STE 102 STUART FL 34996	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SD~~ CD SHANK, CALVIN R 5182 BRANDYWINE WAY STUART FL	☐ Delete	C	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOUGHNER, LEE 1918 SW CRANE CREEK AVENUE PALM CITY FL 34990	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HARMAN, RICHMOND M. 301 HOSPITAL AVENUE STUART FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD HORTON, MARY JO 2626 SW EGRET POND CIR PALM CITY FL	☐ Delete	D	☒ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED Richmond M. Harman 4/27/2001 (561)287-5200

Attachment 975383

Doc # 766554

766554
MARITN MEMORIAL HEALTH SYSTEMS, INC.

ADDITIONAL OFFICERS AND DIRECTORS

SD
MALDONADO, CARLOS MD
421 E. OSCEOLA STREET
STUART, FL 24994

D
MIRAGLIA, VINCENT MD
633 E. 5TH STREET
STUART, FL 34994

D
PATEL, DEVANG
1001 E. OCEAN BLVD. SUITE 103
STUART, FL 33496

D
PENDERGAST, JAMES
1520 SW PENDARVIS COURT
PALM CITY, FL 34990

D
RITTERSBACH, GEORGE MD
835 E. OSCEOLA STREET #A
SUTART, FL 34994