2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State
04-23-2007 90098 015 ****61.25

DOCUMENT # 766554

1. Entity Name
MARTIN MEMORIAL HEALTH SYSTEMS, INC.

40076612

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

04032007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	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. 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, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARNHORST, LARRY 5946 CONGRESSIONAL PLACE STUART, FL 34997	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD Rittersbach, George MD 2221 SE Ocean Blvd # 200 Stuart, FL 34996	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LEHACH, GEORGE 301 HOSPITAL AVE STUART, FL 34994	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD Lehach, George 301 Hospital Ave. Stuart, Fl. 34994	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHANK, CALVIN R 6764 SE PACIFIC DRIVE STUART, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HARMAN, RICHMOND M. 301 HOSPITAL AVENUE STUART, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PENDERGAST, JAMES 1520 SW PENDARVIS COURT PALM CITY, FL 34990	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TBENNY, DWIGHT 301 HOSPITAL AVE STOART FL 34994	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ 4/12/2007 772-287-5200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT
40076612

766554
MARITN MEMORIAL HEALTH SYSTEMS, INC.

ADDITIONAL OFFICERS AND DIRECTORS

D
CARLSON, WILLIAM MD
301 HOSPITAL AVE.
STUART, FL 34994

D
CRIBB, REMBERT
301 HOSPITAL AVE.
STUART, FL 34994

D
FASANO, JOHN MD
301 HOSPITAL AVE.
STUART, FL 34994

SD
HORTON, MARY-JO
301 HOSPITAL AVE.
STUART, FL 34994

D
MIRAGLIA, VINCENT MD
301 HOSPITAL AVE.
STUART, FL 34994