2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#766554

FILED Apr 10, 2012 Secretary of State

Entity Name: MARTIN MEMORIAL HEALTH SYSTEMS, INC.

Current Principal Place of Business: New Principal Place of Business:

301 HOSPITAL AVE 200 HOSPITAL AVE

STUART, FL 34994 US STUART, FL 34994 US

Current Mailing Address: New Mailing Address:

PO BOX 9010

STUART, FL 34995 US

FEI Number: 59-2307522 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:

LORD, ROBERT L JR
301 HOSPITAL AVE
STUART, FL 34994 US

LORD, ROBERT L JR
200 HOSPITAL AVE
STUART, FL 34994 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: 04/10/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T/D

Name: LOWENBERG, JOHN Address: 200 HOSPITAL AVE City-St-Zip: STUART, FL 34994 US

Title: C/D

Name: LEHACH, GEORGE Address: 200 HOSPITAL AVE City-St-Zip: STUART, FL 34994 US

Title:

Name: ZIEGLER, JOHN JR Address: 71 S. RIVER ROAD City-St-Zip: STUART, FL 34996 US

Title: P/D

 Name:
 ROBITAILLE, MARK E

 Address:
 200 HOSPITAL AVE

 City-St-Zip:
 STUART, FL 34994 US

Title: S/D

Name: ORR, JAMES III

Address: 2698 SE SOUTHVIEW DRIVE City-St-Zip: STUART, FL 34996 US

Title: VC/D

 Name:
 DENNY, DWIGHT

 Address:
 200 HOSPITAL AVE

 City-St-Zip:
 STUART, FL 34994 US

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: MARK E. ROBITAILLE P/D 04/10/2012

DOCUMENT NUMBER: 766554
BUSINESS ENTITY NAME MARTIN MEMORIAL HEALTH SYSTEMS, INC
FEI NUMBER 592307522

TITL	E NAME	STREET ADDRESS	CITY	STATE	ZIP CODE
D	Evan Collins, MD	3498 NW Fedealy Hwy	Jensen Beach	FL	34957
D	John Fedorek	1000 SE Monterey Commons Blvd, Suite 101	Stuart	FL	34996
D	Mary-Jo Horton	2626 SW Egret Pond Circle	Palm City	FL	34990
D	Norman McCarvill	2405 Lakeridge Drive	Palm City	FL	34990
D	Vincent Miraglia, MD	2398 SE Ocean Blvd. Suite A	Stuart	FL	34996