

DOCUMENT # 766979

1. Entity Name

ST. LUCIE MEDICAL CENTER AUXILIARY, INC.**FILED**
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90182 002 ****61.25

Principal Place of Business

Mailing Address

**1800 S.E. TIFFANY AVE.
PORT ST. LUCIE FL 34952****1800 S.E. TIFFANY AVE.
PORT ST. LUCIE FL 34952-7521**

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

59-2292230

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

**GAMMON, SUSANNE
1800 S.E. TIFFANY AVE
PORT ST. LUCIE FL 34952**

Name

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

MALLIKA SANKER**1800 SE Tiffany Ave.**

City

Port St. Lucie, Fl.**FL**Zip Code
34952

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	V	☐ Delete
NAME	SPITZER, PEGGY	
STREET ADDRESS	2581 SE DELANO RD	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	

TITLE	P	☒ Change ☐ Addition
NAME	MITCHELL, BONNIE J.	
STREET ADDRESS	130 NW AIROSO BLVD.	
CITY-ST-ZIP	PORT. ST. LUCIE, FL. 34983	

TITLE	P	☐ Delete
NAME	COURTNEY, ADELINE	
STREET ADDRESS	402 STARFLOWER AVENUE	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	

TITLE	PE	☒ Change ☐ Addition
NAME	BUFFEL, GEORGE	
STREET ADDRESS	500 JoAnne Lane	
CITY-ST-ZIP	Port. St. Lucie, Fl. 34952	

TITLE	PE	☐ Delete
NAME	MITCHELL, BONNIE	
STREET ADDRESS	130 AIROSO BLVD	
CITY-ST-ZIP	PORT ST LUCIE FL 34983	

TITLE	V	☐ Change ☒ Addition
NAME	BETCHER, WYNNE	
STREET ADDRESS	2489 SE Camarin St.	
CITY-ST-ZIP	Port St. Lucie, Fl. 34952	

TITLE	D	☐ Delete
NAME	NESBIT, DOROTHY	
STREET ADDRESS	437 SW KENTWOOD RD	
CITY-ST-ZIP	PORT ST LUCIE FL 34953	

TITLE	V	☐ Change ☒ Addition
NAME	LADD, MARCY	
STREET ADDRESS	1167 SW Ithaca St. PSL, FL. 34983	
CITY-ST-ZIP		

TITLE	D	☐ Delete
NAME	WYGANT, MADALINE	
STREET ADDRESS	2337 SE HOLLAND ST	
CITY-ST-ZIP	PORT ST LUCIE FL	

TITLE	T	☐ Change ☒ Addition
NAME	PARRILLA, CARMEN C.	
STREET ADDRESS	1426 SE Appomatox	
CITY-ST-ZIP	Port St. Lucie, Fl. 34952	

TITLE	D	☐ Delete
NAME	BUFFEL, GEORGE	
STREET ADDRESS	500 JO ANNE LANE	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952	

TITLE	S	☐ Change ☒ Addition
NAME	GNEITING, HELEN	
STREET ADDRESS	7 Tortuga	
CITY-ST-ZIP	Port St. Lucie, Fl. 34952	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

766979

St. Lucie Medical Center

Port St. Lucie/Auxiliary

825899

*Accredited with Commendation by
Joint Commission of Accreditation of Healthcare Organizations*

1800 S.E. Tiffany Avenue
Port St. Lucie, Florida 34952
(561) 335-4000, Fax: (561) 398-3608

ST. LUCIE MEDICAL CENTER AUXILIARY, INC.

ADDITIONAL DIRECTORS & OFFICERS:

T

BETTY WYATT
843 SE EVERGREEN TERR
PORT ST. LUCIE, FL. 34983

D

DORIS JACKSON
1286-B BENTLEY CIRCLE
PORT ST. LUCIE, FL. 34986

S

SALLIE DEY
1203 SE WALTON LAKES DR.
PORT ST. LUCIE, FL.

D

JOAN BART
402 SE NARANJA
PORT ST. LUCIE, FL. 24983

D

MAXINE BESSEMER
116 N SEWALLS POINT DR.
STUART, FL. 34996

D

JOHN GAQUER
35 N CARIBBEAN
PORT ST. LUCIE, FL. 34952

D

JOSEPH BUCIOR
267 NE SOLIDA DR
PORT ST. LUCIE, FL. 34983

D

ELIZABETH WEHRMANN
8185 BUCKTHORN CIR.
PORT ST. LUCIE, FL. 34952

D

BETTY GANZ
803 ANITA ST.
FORT PIERCE, FL. 34982

D

AL BUCHANAN
1361 SAN SOUCI LN
PORT ST. LUCIE, FL. 34952

D

FRED GEIGER
164 NW BENTLEY
PORT ST. LUCIE, FL. 34986