F96000005965965

SUBJECT:DELLWOOD_DEVELOPMENT AND REALT	y inc. Za 6
(Name of corporation - must inch	Y INC. Dide sulfix) AFF
Dear Sir or Madam:	HASSI HASSI
The enclosed "Application by Foreign Corporation for AutoFlorida", "Certificate of Existence", and check are submitted foreign corporation to transact business in Florida.	thorization to Transact Business in Red to register the above referenced
Please return all correspondence concerning this matter to	the following:
CHARLES G. MCCAFFREY IV	
(Name of Person)	
Dellwood Development and Real	
(Firm/Company)	0000020043600 -11/14/9601023016
520 North Semoran Blvd. Suit	e 230 ******70.00 ******70.00
(Address)	
Orlando FL 32807 (City/State/Zip)	
(Chy/State/Zip)	
Should you need to call someone concerning this matter, pl	ease call: 4
Charles G. McCaffrey IV at (407)658-1091
(Name of Person)	(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Division of Corporations

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. DELLWOOD DEVELOPMENT AND REALTY INC.		
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)		
2. PENNSYLVANIA (State or country under the law of which it is incorporated) 3. 25-1691171 (FEI number, if applicable)		
(State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. 4-1-90 5. Perpetual		
4. 4-1-90 (Date of Incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")		
6. Business will be transacted after authorization is received. (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)		
•		
7. Dellwood Development and Realty Inc.		
14 East Mall Plaza, Carnegie PA 15106		
(Current mailing address)		
g To list and sell Real Estate		
8. To list and sell Real Estate (Purpose(s) of corporation authorized in home state or country to be carried out in the state of clorida)		
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)		
Name: Charles G. McCaffrey IV		
Office Address: 520 North Semoran Blvd. Suite 230		
Orlando , Florida , 32807 (Zip Code)		
10. Registered agent's acceptance: (Zip Code)		
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.		
(Registered agents signature)		
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other		

incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O . Box NOT acceptable)

Chairman: JOHN J. SHELPMAN

Address: 226 BEN-TIL DRIVE

PITTSBURGH PA 15236 Vice Chairman: CHARLES G. MCCAFFREY III Address: 1006 OSAGE ROAD PITTSBURGH PA 15243 Director: SANDRA P. MCCAFFREY 1006 OSAGE ROAD Address: ____ PITTSBURGH PA 15243 JEAN D. SHELPMAN Di ector: 226 BEN-TIL DRIVE Address: ____ PITTSBURGH PA 15236 B. OFFICERS (Street address only- P. O. Box NOT acceptable) JOHN J. SHELPMAN President: _____ Address: 226 BEN-TIL DRIVE PITTSBURGH PA 15236 CHARLES G. MCCAFFREY III Vice President: __ Address: ____ 1006 OSAGE ROAD PITTSBURGH PA 15243 ANN MCDONALD Secretary: 417 MELLON AVENUE Address: ___ BADEN PA 15005 ADRIENNE T. OLSEN Treasurer: __ 1001 AJAY DRIVE Address: _ LIBRARY PA 15129 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. any officer listed in number 12 of the application) (Signature of Chairman, Vice Chairman, or Charles G. McCaffrey III Vice Chairman (Typed or printed name and capacity of person signing application)



COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

OCTOBER 25, 1996

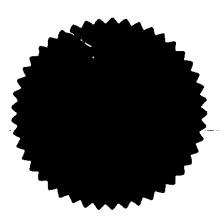
TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

96 NOV 14 PH 3: 32 SECRETARY OF STATE TALLAHASSEE, FLORID

I DO HEREBY CERTIFY THAT,

DELLWOOD DEVELOPMENT & REALTY, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

SWAL

TO: Qualification/Tax Lien Section

SUBJECT: Bon Secours Health System, Inc.
(Name of corporation - must include suffix) 300020043631
-11/14/9601023017 There Sir on Medam: ******78.75 ******78.75
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
3/11/14
Stephen K. Boone, Esq. (Name of Person)
Boone, Boone & Hines, P.A. (Firm/Company) 1001 Avenida del Circo (Address) Venice, Florida 34285 (City/State/Zip)
Should you need to call someone concerning this matter, please call: Stephen K. Boone at 941 1488-6716 (Name of Person) (Area Code & Daytime Telephone Number)
(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Division of Corporations

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassue, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION \$47.1503, FLORIDA STATUTES, THE FOLLOWING IS

SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Bon Secours Health System, Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) <u>Maryland</u> (State or country under the law of which it is incorporated) (FEI number, if applicable) 6/24/83 Perpetual (Date of Incorporation) (Duration: Year corp. will cease to exist or November 1996 ы (Date first transacted business in Florida. (SEE SECTIONS 697.1501, 697.1502, AND 817.155, F.S.) Bon Secours Health Systems, Inc. ج 9 1505 Marriottsville Road, Marriottsville, MD (Current mailing address) Religious, educational, scientific and charitable (501(3)(c) corp) (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Stephen K. Boone Office Address: 1001 Avenida del Circo <u>Venice</u> , Florida, 34285 (Zip Code) 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

QQ/L

5 13

 Names and addresses of officers and/or directors: (Street address O NOT acceptable) 	NLY-P. O. Box
A. DIRECTORS (Street address only- P. O . Box NOT acceptable)	
Chairman: SEE EXHIBIT A	
Address:	
Vice Chairman:	
Address:	
Director;	-
Address:	
Director:	
Address:	ASS S
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	HOV PREST
President: SEE EXHIBIT B	L11-4 4
Address:	Mo 3
Vice President:	- 5
Address:	
Secretary:	
Address:	•
Treasurer:	
Address:	·
NOTE: If necessary, you may attach an addendum to the application listi	ng additional
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the	
4. Michael W. Cottrell, Treasurer (Typed or printed same and capacity of person signing application)	

BON SECOURS HEALTH SYSTEM BOARD OF DIRECTORS

Christopher M. Carney Acting Chief Executive Officer Bon Secours Health System, Inc. 1505 Marriottsville Road Marriottsville, Maryland 21104 (410) 442-5511

Sister Patricia Eck
Executive Vice President
Bon Secours - Richmond Health Corp.
5801 Bremo Road
Richmond, Virginia 23226
(804) 281-8044
(804) 285-8327 - FAX

Ms. Vernice Ferguson 132 Quincy Place, N.E. Washington, D.C. 20002 (202) 635-8904

Mr. John Fernandes
Director, Educational Services
Institute of Internal Auditors
249 Maitland Avenue
Altamonte Springs, Florida 32701-4201
(407) 830-7600, ext. 253
(407) 831-5171 - FAX

Sister Mary Jean Flaherty
Dean
School of Nursing
Catholic University of America
Washington, D.C. 20064
(202) 319-5403
(202) 319-6485 - FAX

Sister Nancy Glynn
Director, Community Development
Bon Secours Hospital
2000 West Baltimore Street
Baltimore, Maryland 21223
(410) 362-3016
(410) 362-3450 - FAX

Mr. John H. Kennedy 101 Cheswold Lane Haverford, Pennsylvania 19041* (610) 649-3865

Robert W. Knapp, M.D. 3101 American Legion Road Chesapeake, Virginia 23321 (804) 484-2724 (804) 484-1682 - FAX

Reverend John P. Langan, S.J.
Loyola University of Chicago
Crown Center for the Humanities, Rm 341
6525 N. Sheridan Road
Chicago, IL 60626
(312) 508-2308
(312) 508-2292 - FAX

Sister Anne M. Lutz
Senior Vice President, Mission Senior Vice President Senior Vice President, Mission Senior Vice President Senior

Mr. Paul G. Miller LSC, Inc. P.O. Box 725 Brooklandville, MD 21022-0725 (410) 823-9200 (410) 823-9203 - FAX

L. Gregory Pawlson, M.D.
Chairman
Department of Health Care Sciences
George Washington University
Medical Center
2150 Pennsylvania Avenue, N.W.
Washington, D.C. 20037
(202) 994-4439
(202) 994-8531 - FAX

Board of Directors Page Two

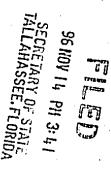
Sister Mary Catherine Rogers Vice President, Mission Bon Secours - Venice Hospital 540 The Rialto Venice, Florida 34285-3298 (941) 483-7862 (941) 483-7699 - FAX

Sister Mary Shimo Chaplain Carroll County General Hospital 200 Memorial Avenue Westminster, Maryland 21157 (410) 848-3000

Donald E. Strange First Dental 85 Devonshire Street Boston, MA 02109 (617) 742-4750 (617) 742-4810 - FAX

Sister Alice Talone c/o Bon Secours Hospital 2000 West Baltimore Street Baltimore, Maryland 21223 (410) 947-2202

Sister Rita Thomas Maryview Medical Center 3636 High Street Portsmouth, Virginia 23707 (804) 398-2123 (804) 398-2359 - FAX



BON SECOURS HEALTH SYSTEM, INC.

BOARD OFFICERS

1996

Sister Rita Thomas, C.B.S.
Chairperson
c/o Maryview Medical Center
3636 High Street
Portsmouth, Virginia 23707

Sister Mary Jean Flaherty
Secretary
c/o Catholic University of America
School of Nursing
Washington, D.C. 20064

Sister Anne M. Lutz Assistant Secretary c/o Bon Secours Health System 1505 Marriottsville Road Marriottsville, Maryland 21104

Michael W. Cottrell
Treasurer
c/o Bon Secours Health System
1505 Marriottsville Road
Marriottsville, Maryland 21104



STATE OF MARYLAND

479745

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

I, LEAH HAMM-CURRY OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE; AND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT BON SECOURS HEALTH SYSTEM, INC.
IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF
THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED ALL
ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON
THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS
AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT
AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER
OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN THE STATE
OF MARYLAND.

96 NOV 14 PH 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE THIS 10TH DAY OF OCTOBER, 1996.

LEXII HAMM-CURRY OFFICE SUPERVISOR II

AT5-031

a service of the service and service of the service