

2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000003149

FILED
Feb 14, 2012
Secretary of State

Entity Name: SUNCOAST HEALTH AND EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

14000 FIVAY RD.
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

PO BOX 1893
NEW PORT RICHEY, FL 346561893

New Mailing Address:

14000 FIVAY ROAD
HUDSON, FL 34667

FEI Number: 59-3647767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONOVER, KURT J
2215 FOGGY RIDGE PKY
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

CARDALENA, JOHN
11827 WAXMYRTLE COURT
NEW PORT RICHEY, FL 34654 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: JOHN CARDALENA

02/14/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD
Name: PRAGER, HARRIET
Address: 7623 TOLAR DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: SD
Name: VIGILIS, MARIANNE S
Address: 11913 BOYNTON LANE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: TD
Name: TOBIANSKI, GERALD J
Address: 12141 SPARTAN WAY #102
City-St-Zip: BAYONET POINT, FL 34667

Title: PD
Name: CARDALENA, JOHN
Address: 11827 WAXMYRTLE COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

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: JOHN CARDALENA

PRES

02/14/2012

Electronic Signature of Signing Officer or Director

Date