

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000942

FILED
Feb 25, 2010
Secretary of State

Entity Name: WEST KENDALL BAPTIST HOSPITAL, INC.

Current Principal Place of Business:

6855 RED ROAD
SUITE 600
CORAL GABLES, FL 33143

New Principal Place of Business:

Current Mailing Address:

6855 RED ROAD
SUITE 600
CORAL GABLES, FL 33143

New Mailing Address:

FEI Number: 52-2438452 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEDMAN, DAVID R
6855 RED ROAD
SUITE 600
CORAL GABLES, FL 33143 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: HERNANDEZ-LICHTL, JAVIER
Address: 9555 SW 162ND AVENUE
City-St-Zip: MIAMI, FL 33196

Title: DCHR
Name: ALONSO, TONY
Address: 9555 SW 162ND AVENUE
City-St-Zip: MIAMI, FL 33196

Title: D
Name: CLEELAND, DAVID W
Address: 9555 SW 162ND AVENUE
City-St-Zip: MIAMI, FL 33196

Title: D
Name: CADMAN, GEORGE E III
Address: 9555 SW 162ND AVENUE
City-St-Zip: MIAMI, FL 33196

Title: D
Name: WENDELL, BEARD R
Address: 9555 SW 162ND AVENUE
City-St-Zip: MIAMI, FL 33196

Title: D
Name: FERNANDEZ, OTTO
Address: 9555 SW 162ND AVENUE
City-St-Zip: MIAMI, FL 33196

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: JAVIER HERNANDEZ-LICHTL

CEO

02/25/2010

Electronic Signature of Signing Officer or Director

Date