

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03828

FILED  
Mar 08, 2011  
Secretary of State

**Entity Name:** SHANDS JACKSONVILLE HEALTHCARE, INC.

**Current Principal Place of Business:**

655 WEST 8TH STREET  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

CHARLES E. CANIFF, ESQ.  
655 WEST 8TH STREET  
JACKSONVILLE, FL 32209

**New Mailing Address:**

**FEI Number:** 59-2441966      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CANIFF, CHARLES E ESQ.  
655 WEST 8TH STREET  
JACKSONVILLE, FL 32209      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: CD  
Name: GUZICK, DAVID S MD, PHD  
Address: 1515 SW ARCHER ROAD, SUITE 23C1  
City-St-Zip: GAINESVILLE, FL 32610

Title: D  
Name: MCGRUFF, W. A  
Address: 6702 LINFORD LANE  
City-St-Zip: JACKSONVILLE, FL 32217

Title: PD  
Name: BURKHART, JAMES R  
Address: 655 W 8TH ST  
City-St-Zip: JACKSONVILLE, FL 32209

Title: T  
Name: GLEASON, MICHAEL E  
Address: 655 W 8TH ST  
City-St-Zip: JACKSONVILLE, FL 32209

Title: S  
Name: CANIFF, CHARLES E ESQ  
Address: 655 WEST 8TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D  
Name: NUSS, ROBERT C MD  
Address: 653 WEST EIGHTH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

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: CHARLES E. CANIFF

S

03/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date

**Attachment  
2011 Annual Report  
Document # N03828  
Shands Jacksonville HealthCare, Inc.**

3/8/11

**Directors**

**Richard D. Danford, Jr., Ph.D.**  
President  
Jacksonville Urban League  
903 W. Union Street  
Jacksonville, Florida 32204-1161

**J. Sample Magee, M.D.**  
915 West Monroe Street  
Ste. 200  
Jacksonville, Florida 32204

**Harold S. O'Steen**  
O'Steen Investment Company  
759 Edgewood Avenue North  
Jacksonville, Florida 32205

**L. Jerome Spates**  
c/o Sickle Cell  
555 West 11th Street  
Jacksonville, FL 32209

**Linda R. Edwards, MD**  
3rd Floor, Faculty Clinic  
653 West 8th Street  
Jacksonville, FL 32209

**Samir Y. Array, MD**  
Medical Director  
UF Baymeadows Family  
Practice & Pediatric Center  
8274 Bayberry Road  
Jacksonville, FL 32256

**Ramon D. Bautista, MD, MBA**  
Assoc. Professor of Neurology  
Director, Comprehensive  
Epilepsy Program  
Neurology Clerkship Director  
President, Faculty Council  
9th Floor, Tower I  
580 West 8th Street  
Jacksonville, FL 32209

**Christopher R. Williams, MD**  
3rd Floor, Faculty Clinic  
653 West 8th Street  
Jacksonville, FL 32209

**Theodore A. Bass, MD**  
Professor of Medicine/Chief,  
Division of Cardiology/Program  
Director, Interventional  
Cardiology Fellowship Program  
5th Floor, Ambulatory Care Ctr.  
655 West 8th Street  
Jacksonville, FL 32209

**Beth McCague**  
2358 Riverside Avenue # 506  
Jacksonville, FL 32204

**Lynn Pappas**  
Pappas, Metcalf, Jenks & Miller  
245 Riverside Ave., Suite 400  
Jacksonville, FL 32202

**Nat Glover**  
Edward Waters College  
President  
President's Office # 200  
1658 Kings Road  
Jacksonville, FL 32209

**Sidney J. Gefen**  
6740 Epping Forest Way N. #109  
Jacksonville, FL 32217

**Lawrence (Laurie) DuBow**  
6730 Epping Forest Way W. Apt.  
Jacksonville, FL