

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001100

FILED
Jun 26, 2009
Secretary of State

Entity Name: DESOTO MEMORIAL HOSPITAL AUXILIARY, INC.

Current Principal Place of Business:

900 NORTH ROBERT AVE
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

900 NORTH ROBERT AVE
ARCADIA, FL 34266

New Mailing Address:

FEI Number: 20-8362266 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

VINCENT A. SICA, P.A.
10 SOUTH DESOTA AVE STE 101
ARCADIA, FL 34266 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WHITE, EDNA
Address: 2692 NE HWY 70 #670
City-St-Zip: ARCADIA, FL 34266

Title: PE () Delete
Name: OVASKA, HELEN
Address: 2692 NE HWY 70 #24
City-St-Zip: ARCADIA, FL 34266

Title: P () Delete
Name: DUFF, JUDIE
Address: 2692 NE HWY 10TH 44
City-St-Zip: ARCADIA, FL 34266

Title: S () Delete
Name: POSEY, PAT
Address: 7799 GOLF BLVD.
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: T () Delete
Name: DUNDERMAN, JANET
Address: 2692 NW HWY 70 #476
City-St-Zip: ARCADIA, FL 34266

Title: CS () Delete
Name: RADCLIFF, ANGIE
Address: 2692 NE HWY 70 #513
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: HARTSEL, DOROTHY
Address: 6837 NE CUBITIS AVE #293
City-St-Zip: ARCADIA, FL 34266

Title: PE (X) Change () Addition
Name: RUSSELL, TWIGHLA
Address: 160 OAK LANE
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: P (X) Change () Addition
Name: DUFF, JUDIE
Address: 2692 NE HWY # 44
City-St-Zip: ARCADIA, FL 34266

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: DUNDERMAN, JANET
Address: 2692 NE HWY 70 #476
City-St-Zip: ARCADIA, FL 34266

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANET DUNDERMAN

T

06/26/2009

Electronic Signature of Signing Officer or Director

Date