

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N06560

1. Entity Name

INDIAN RIVER MEMORIAL HOSPITAL, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90983 027 ****61.25

Principal Place of Business

Mailing Address

~~078 MICHAEL LYKORAKIS~~
1000 36TH ST.
VERO BEACH FL 32960

~~078 MICHAEL LYKORAKIS~~
1000 36TH ST.
VERO BEACH FL 32960-4862



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1000 36th Street
Suite, Apt. #, etc.

3. Mailing Address
1000 36th Street
Suite, Apt. #, etc.

City & State
Vero Beach, FL

City & State
Vero Beach, FL

4. FEI Number
59-2496294

Applied For
Not Applicable

Zip
32960

Country

Zip
32960

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUSI, JEFFREY L
1000 36TH ST.
VERO BEACH FL 32960

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME SUSI, JEFFREY L
STREET ADDRESS 1000 36TH ST.
CITY-ST-ZIP VERO BEACH FL 32960 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE CD
NAME WRIGHT, GEORGE F
STREET ADDRESS 501 SPYGLASS LANE
CITY-ST-ZIP VERO BEACH FL 32963 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VC
NAME KURTZ, JOHN C
STREET ADDRESS 100 VISTA ROYALE BLVD
CITY-ST-ZIP VERO BEACH FL 32962 ☐ Delete

TITLE CD
NAME Kurtz, John C.
STREET ADDRESS 100 Vista Royale Blvd.
CITY-ST-ZIP Vero Beach, FL 32962 ☒ Change ☐ Addition

TITLE VCD
NAME VONZIELINSKI, THEODOR V B
STREET ADDRESS 777 37TH ST C-104
CITY-ST-ZIP VERO BEACH FL 32960 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE VCD
NAME Catlin, Loring
STREET ADDRESS 3055 Cardinal Drive, Suite 305
CITY-ST-ZIP Vero Beach, FL 32964 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE VCD
NAME Sheehan, Charles V.
STREET ADDRESS 884 Indian Lane
CITY-ST-ZIP Vero Beach, FL 32963 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffery L. Susi 561-567-4311 (EX 1100) 4/28/00

Date

Daytime Phone #

CR2E037 (9/99)