2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07689

FILED Mar 29, 2012 Secretary of State

Entity Name: UNIVERSITY COMMUNITY HOSPITAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3100 E FLETCHER AVE TAMPA, FL 33613 US

Current Mailing Address: New Mailing Address:

3100 E FLETCHER AVE TAMPA, FL 33613 US

FEI Number: 59-2554889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MICELI-MULLEN, JOLINE
3100 E. FLETCHER AVE.
TAMPA, FL 33613 US

WILTSE, KATHYRN
3100 E. FLETCHER AVE.
TAMPA, FL 33613 US

TAMPA, FL 33613 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: KATHYRN WILTSE 03/29/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: C

Name: LANDREVILLE, ANDRE MD Address: 3100 E. FLETCHER AVE. City-St-Zip: TAMPA, FL 33613

Title: VC

 Name:
 MEYER, FRED

 Address:
 3100 E. FLETCHER AVE.

 City-St-Zip:
 TAMPA, FL 33613

Title: S

Name: MCDONALD, APRIL
Address: 3100 E. FLETCHER AVE.
City-St-Zip: TAMPA, FL 33613

Title: T

Name: STONESIFER, KURT MD
Address: 16201 SENTRY WOODS COURT

City-St-Zip: ODESSA, FL 33556

Title:

Name: ADAIR, DARBRA

Address: 30304 LAURELWOOD LANE City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D

Name: BARKETT, ANTHONY Address: 704 GUISANDO DE AVILA

City-St-Zip: TAMPA, FL

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: FRED MEYER VC 03/29/2012