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NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

5-22-96 B-6580 -C
(9)

DOCUMENT # N18087

1. Corporation Name

MEMORIAL HEALTH SYSTEM OF BROWARD, INC.



Principal Place of Business

Mailing Address

C/O FRANK V. SACCO
3501 JOHNSON STREET
HOLLYWOOD FL 33021

C/O FRANK V. SACCO
3501 JOHNSON STREET
HOLLYWOOD FL 33021

3. Date Incorporated or Qualified
12/05/1986

3a. Date of Last Report
02/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SACCO, FRANK V.
3501 JOHNSON STREET
HOLLYWOOD FL 33021

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME BURTON, CAHN
STREET ADDRESS 1920 E. HALLANDALE BEACH BLVD, STE 504
CITY-ST-ZIP HALLANDALE FL

TITLE ST ☐ DELETE
NAME EAVENSON, STEVEN J.
STREET ADDRESS 3501 JOHNSON ST.
CITY-ST-ZIP HOLLYWOOD FL

TITLE PD ☐ DELETE
NAME SACCO, FRANK V.
STREET ADDRESS 3501 JOHNSON STREET
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ DELETE
NAME ZINKLER, GEORGE
STREET ADDRESS 3350 NO 36 PL
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ DELETE
NAME STEFFENS, FRANK M.
STREET ADDRESS 3501 JOHNSON ST.
CITY-ST-ZIP HOLLYWOOD FL

TITLE CD ☐ DELETE
NAME PRIMEAU, JOHN
STREET ADDRESS 3830 HOLLYWOOD BLVD.
CITY-ST-ZIP HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME EAVENSON, J. STEVEN
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE CD ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME CORBIN, MYRTLE
6.3 STREET ADDRESS 3501 JOHNSON ST.
6.4 CITY-ST-ZIP HOLLYWOOD FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/15/96

Date

(954) 985-5920

Daytime Phone #

CR2E037 (12/95)