

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32088

**FILED**  
**Mar 26, 2010**  
**Secretary of State**

**Entity Name:** RETIRED EMPLOYEES OF TALLAHASSEE MEMORIAL HEALTHCARE, INC.

**Current Principal Place of Business:**

2103 WOODSTOCK LANE  
TALLAHASSEE, FL 323032738 US

**New Principal Place of Business:**

**Current Mailing Address:**

2103 WOODSTOCK LANE  
TALLAHASSEE, FL 32303 US

**New Mailing Address:**

**FEI Number:** 59-2945895

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EBEL, JOHN A.  
2103 WOODSTOCK LANE  
TALLAHASSEE, FL 32303 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: P  
Name: CONKLIN, JOSEPH E  
Address: 409 GRAIL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: V  
Name: ELDRIDGE, JUDY M  
Address: 1507 COOMBS DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: T  
Name: EBEL, JOHN A  
Address: 2103 WOODSTOCK LANE  
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: DS  
Name: NELSON, SHIRLEY  
Address: 1212 SPOTTSWOOD DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: D  
Name: SHEFFIELD, JAMIE  
Address: 101 OSCEOLA ROAD  
City-St-Zip: PERRY, FL 32348 US

Title: D  
Name: TRICQUET, BETTY LOU  
Address: 1783 FOLKSTONE ROAD  
City-St-Zip: TALLAHASSEE, FL 32312 US

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: JOHN A. EBEL

MR.

03/26/2010

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

\_\_\_\_\_  
Date