

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32597

FILED
Feb 02, 2010
Secretary of State

Entity Name: MEMORIAL HOSPITAL FLAGLER, INC.

Current Principal Place of Business:

60 MEMORIAL MEDICAL PARKWAY
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

60 MEMORIAL MEDICAL PARKWAY
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 59-2951990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIMBLE, T. L
111 NORTH ORLANDO AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

BROMME, JEFF
111 NORTH ORLANDO AVENUE
WINTER PARK, FL 32789 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: JEFF BROMME

02/02/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD
Name: SCHULTZ, MICHAEL
Address: 2400 BEDFORD ROAD
City-St-Zip: ORLANDO, FL 32803

Title: PD
Name: OTTATI, DAVID
Address: 60 MEMORIAL MEDICAL PARKWAY
City-St-Zip: PALM COAST, FL 32164

Title: D
Name: JOHNSON, SANDRA K
Address: 111 N ORLANDO AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: AS
Name: ADDISCOTT, LYNN C
Address: 111 NORTH ORLANDO AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: AS
Name: BLOCK, MARK L
Address: 111 NORTH ORLANDO AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: AS
Name: DEPRADA, ARIEL
Address: 111 NORTH ORLANDO AVENUE
City-St-Zip: WINTER PARK, FL 32789

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: ARIEL DE PRADA

AS

02/02/2010

Electronic Signature of Signing Officer or Director

Date