

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2008 8:00 am
Secretary of State

05-08-2008 90011 026 ****61.25

DOCUMENT # N36505 1. Entity Name CLEVELAND CLINIC FLORIDA HOSPITAL (A NONPROFIT CORPORATION)					
Principal Place of Business 3100 WESTON ROAD WESTON, FL 33331			Mailing Address 1950 RICHMOND ROAD, TR-38 ATTN: KERRIE KRIZNER LYNDHURST, OH 44124		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Attn: Maisha Gibson 3050 Science Park Dr., City & State AC321 Beachwood, OH Zip 44122 Country Cuyahoga			
City & State Beachwood, OH		4. FEI Number 65-0172168		Applied For <input type="checkbox"/> Not Applicable	
Zip 44122		Country Cuyahoga		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ANDREW SERVICE CORPORATION OF FLORIDA 201 N. FRANKLIN STREET SUITE 2100 TAMPA, FL 33602				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO GLASS, STEVE C 9500 EUCLID AVENUE, H-18 CLEVELAND, OH 44195	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO, Florida Fernandez, Bernardo, M.D. 3100 Weston Road Weston, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COOT O'BOYLE, MICHAEL 9500 EUCLID AVE. CLEVELAND, OH 44195	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO, Florida Marty Sargeant 3100 Weston Road Weston, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROWAN, DAVID W 9500 EUCLID AVE. CLEVELAND, OH 44195	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Secretary Michael J. Meehan 9500 Euclid Avenue Cleveland, OH 44195
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO CAMPBELL, SCOTT 2950 CLEVELAND CLINIC BLVD. WESTON, OH 33331	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MIXON, A. MALACHI III 9500 EUCLID AVE. CLEVELAND, OH 44195	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman and Trustee Mixon, A. Malachi, III 9500 Euclid Avenue Cleveland, OH 44195
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOT COSGROVE, DELOS M M.D. 9500 EUCLID AVENUE H-18 CLEVELAND, OH 44195	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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				<div style="display: flex; justify-content: space-between;"> 4/21/2008 (216) 444-3441 </div> <div style="display: flex; justify-content: space-between;"> Date Daytime Phone # </div>	