2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT # N37129** 03-06-2006 90008 040 ****61.25 FISHERMEN'S HOSPITAL AUXILIARY, INC. Principal Place of Business Mailing Address 3301 OVERSEAS HWY 3301 OVERSEAS HWY MARATHON, FL 33050 MARATHON, FL 33050 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092006 CR2E037 (11/05) Applied For City & State City & State 4. FEI Number 65-0183514 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent MILLER, ROBERT K. Street Address (P.O. Box Number is Not Acceptable) 2975 OVERSEAS HWY. MARATHON, FL 33050 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filling Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Added to Fees Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2006 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD ■ Addition TITLE ☐ Delete тлті ғ PD XI Change MONTGOMERY, SYLVIA NAME NAME SURPHEN, PATRICIA STREET ADDRESS 65 TINGLER LANE STREET ADDRESS PO BOX 431462 CITY-ST-ZIP MARATHON, FL 33050 CITY-ST-ZIP BIG PINE KEY. Change ☐ Addition TITLE TITLE ☐ Delete SUTPHEN, PATRICIA NAME NAME DIEZEL, ROSE STREET ADDRESS PO BOX 431462 STREET ADDRESS PO BOX 522457 CITY-57-71P BIG PINE KEY, FL 33043 CITY-ST-712 MARATHON, FL_33052 TD Change ☐ Addition Delete. 1171 F TITLE DIEZEL, ROSE NAME KAME TD BAUGHMAN, JOSEPHINE PO BOX 522457 STREET ADDRESS STREET ADDRESS 1022 E.75th St, Ocean MARATHON SHORES, FL 33052 CITY-ST-ZIP CITY-ST-ZIP Marathon FI 33050 Delete ☐ Change ☐ Addition TITLE TITLE **UHL, JEANNE** NAME NAME LARSON, DOLORES STREET ADDRESS STREET ADORESS 712 26TH ST OCEAN 1361 Overseas Hwy C2. Marathon, F1 33050 CITY-ST-ZIP MARATHON, FL 33050 CITY-ST-ZIP TITLE ☐ Addition ☐ Delete TITLE ☐ Change LARSON, DOLORES NAME NAME UHL, JEANNE 712 26th STREET ADDRESS STREET ADDRESS 1361 OVERSEAS HWY C2 CITY-ST-ZIP MARATHON, FL 33050 CITY-ST-ZIP ■ Addition TITLE ☐ Delete TITLE **⊠** Change BAUGHMAN, JOSEPHINE NAME NAME MONTGOMERY, SYLVIA ... STREET ADDRESS 1022 E 75TH ST OCEAN STREET ADDRESS 65 Tingle Lane MARATHON, FL 33050 CITY-ST-ZIP F1 Marathon,

SIGNATURE:

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 eath; 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. 2/06 305-743-5533 Destre Priore 9 29 5514

FILED

Mar 06, 2006 8:00 am