

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37129

FILED
Mar 02, 2009
Secretary of State

Entity Name: FISHERMEN'S HOSPITAL AUXILIARY, INC.

Current Principal Place of Business:

3301 OVERSEAS HWY
MARATHON, FL 33050

New Principal Place of Business:

Current Mailing Address:

3301 OVERSEAS HWY
MARATHON, FL 33050

New Mailing Address:

FEI Number: 65-0183514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, ROBERT K.
2975 OVERSEAS HWY.
MARATHON, FL 33050 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: D () Delete
Name: MONTGOMERY, SYLVIA
Address: 65 TINGLER LANE
City-St-Zip: MARATHON, FL 33050

Title: D () Delete
Name: SHAFFER, MARJORIE
Address: P.O. BOX 522512
City-St-Zip: MARATHON SHORES, FL 33052

Title: P () Delete
Name: DIEZEL, ROSE
Address: PO BOX 522457
City-St-Zip: MARATHON SHORES, FL 33052

Title: S () Delete
Name: LARSON, DOLORES
Address: 1361 OVERSEAS HWY C2
City-St-Zip: MARATHON, FL 33050

Title: T () Delete
Name: BAUGHMAN, JOSEPHINE
Address: 1022 E 75TH ST OCEAN
City-St-Zip: MARATHON, FL 33050

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BAKER, DIANA
Address: 1140 76TH STREET, OCEAN
City-St-Zip: MARATHON, FL 33050

Title: P (X) Change () Addition
Name: WELDY, CAROL
Address: 803 CORTE DEL SOL
City-St-Zip: MARATHON, FL 33050

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SCHWARTZ, JOANNE
Address: P. O. BOX 510088
City-St-Zip: KEY COLONY BEACH, FL 33051

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOSEPHINE BAUGHMAN

T

03/02/2009

Electronic Signature of Signing Officer or Director

Date