

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000003445

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** OCEAN REEF MEDICAL CENTER FOUNDATION, INC.

**Current Principal Place of Business:**

50 BARRACUDA LN  
KEY LARGO, FL 33037

**New Principal Place of Business:**

**Current Mailing Address:**

50 BARRACUDA LN  
KEY LARGO, FL 33037

**New Mailing Address:**

**FEI Number:** 65-0443146

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YOUNG, KEITH  
50 BARRACUDA LANE  
KEY LARGO, FL 33037 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:** S  
**Name:** SHIPLEY, SHIRLEY  
**Address:** 34 CARD SOUND RD  
**City-St-Zip:** KEY LARGO, FL 33037

**Title:** C  
**Name:** LEE, PATRICK  
**Address:** 13 SUNRISE CAY DRIVE  
**City-St-Zip:** KEY LARGO, FL 33037

**Title:** T  
**Name:** RUFFING, ARTHUR  
**Address:** 50 CLUBHOUSE ROAD, #48  
**City-St-Zip:** KEY LARGO, FL 33037

**Title:** ATS  
**Name:** YOUNG, KIETH  
**Address:** 1601 SE 17TH AVENUE  
**City-St-Zip:** HOMESTEAD, FL 33035

**Title:** VC  
**Name:** MEENAN, JAMES  
**Address:** 24 DOCKSIDE LANE, PMB 240  
**City-St-Zip:** KEY LARGO, FL 33037

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:** KEITH YOUNG

ECO

04/25/2011

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

\_\_\_\_\_  
Date