• . • •	FILE NOW: FILI	NG	FEE IS \$61.25			FILED			
NONPROFIT CORPORATION ANNUAL REPORT 1999			FLORIDA DEPAR Katherin Secretary DIVISION OF C	o Hari	r <b>is</b> te	May 04, 1999 8:00 am Secretary of State 05-04-1999 90017 037 ****61.25			
DOCU 1. Corporation	MENT # N93000			N,		7/3024 - 90017 - 57 4 +			
Principal Place	of Rusiness	M	ailing Address						
301 Hospital Stuart FL 34 US	. AVE	P	O BOX 9010 TUART FL 34995						
2. Principal Pl	ace of Business	2a. 26	Mailing Address			3. Date Incorporated or Qualifed 12/22/1993			
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			4. FEI Number Applied For 65-0466177 Not Applicable			
22 City & State	9	27.	City & State			5 Cartificate of Status Desired S8.75 Additional			
23 Zip	Country	28	Zip	Cou	intry	6. Election Campaign Financing     \$5.00 May Be			
24	25 9. Name and Address of Current	29 Regio		30	1	Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent			
-	9. Name and Address of Current	Regis	tereo Agent		81 Name				
HARMAN,	RICHMOND				82 Street	Address (P.O. Box Number is Not Acceptable)			
301 HOSE			, •		83				
STUART F	E 34494 6 200								
•	。1997年1月1日日) 1999年1月1日(1997年) 1999年日月日(1997年)				84 City	FL <sup>85</sup> <sup>Zip Code</sup>			
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florid	la. Such change was au	uthorized	d by the corpo	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered			
SIGNATURE	Signature, typed or printed name of registered agent	and title	f applicable. (NOTE:	Registered	Agent signature n	required when reinstating) DATE			
12.	OFFICERS AND		CTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE				1.1 Ti		Change L Addition			
NAME STREET ADORESS	ULANO, HARVEY 500 E. OSCEOLA ST.		· ·	1.2 N	AME TREET ADDRESS				
CITY-ST-ZIP	STUART FL 34994		. 1		ITY-ST-ZIP				
TTLE	CD		DELETE	2.1 TI	TLE	D Change CAddition			
NAME	BEATTY, MARK MD.		·. I <u>.</u>	2.2 N		Suarez, Jose 6103 SE Federal Hwy.			
STREET ADDRESS	931 E. OCEAN BLVD. STE C STUART FL 34994				TREET ADDRESS	Stuart, FL 34997			
CITY-ST-ZIP TITLE	PD			3.1 TI		D Change XAddition			
NAME	COCORULLO, L M		• •	3.2 N	AME	Dennison, Daniel			
STREET ADDRESS	301 HOSPITAL AVE	i			TREET ADDRESS	· · · · · ·			
CITY-ST-ZIP TITLE	STUART FL			<u>3.4. C</u> 4.1 Ti	ITY-ST-ZIP	D Change GrAddition			
NAME	COLLIN, ALAN MD		•	4. 2 N	IAME	Baraniak, Gregory			
STREET ADDRESS	509 RIVERSIDE DR., #200				TREET ADDRESS	6216 SE Federal Hwy.			
CITY-ST-ZIP	STUART FL 34994			4.4 C	11Y-ST-ZIP 11 F	D Change XAddition			
TITLE NAME	TD ``WHITAKER, DAVID			5.2 N		Clark, Lowell			
STREET ADDRESS	900 E OCEAN BLVD STE 200			5.3 S	TREET ADDRESS	1000 III COMPEN DEGEN DIVER			
CITY-ST-ZIP	STUART FL	-		5.4 C	nty-st-zip <sub>.</sub> III F	Jensen Beach, FL 34957			
TITLE	D HARMAN, RICHMOND M			6.1 N		Sabol, Stuart			
NAME STREET ADDRESS	301 HOSPITAL AVE				TREET ADDRESS	844 E. Ocean Blvd.			
CITY ST ZIP	STUART FL 34994				ITY-ST-ZIP	Stuart, FL 34994			
indicated	on this annual report or supplemental :	annua	report is true and accur	rate and	i that my sign	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an			
* officer or -	director of the corporation or the receiv or Block 13 if changed, or on an attach	er or i	rustee empowered to ex	xecute t	his report as i	required by Chapter 617. Horida Statutes; and that my hame appears in			
•	- Along	ልማ	OF de		ED				
SIGNAT		PRINTE	NAME OF SIGNING OFFICER			Date Daytime Phone #			

S	l	G	N	IA	٢U	IF	RE	:	

# 475624-9007-37 N9800005733

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#### MARTIN MEMORIAL PHYSICIAN-HOSPITAL ORGANIZATION

Additional Officers and Directors

#### D

Pare, Robert, Jr. 1027 E. Ocean Blvd. Stuart, FL 34994

### D

Gorodetsky, Jeffery 633 East 5th Street Stuart, FL 34994

### D

Robitaille, Mark E. 301 Hospital Ave. Stuart, FL 34994

# D

Donohue, Salvatore 301 Hospital Ave. Stuart, FL 34994

# D

Robbins, Howard 301 Hospital Ave. Stuart, FL 34994