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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000001372

1. Corporation Name

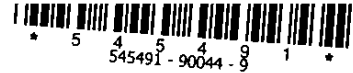
WUESTHOFF HEALTH SYSTEMS FOUNDATION, INC.

Principal Place of Business

110 LONGWOOD AVENUE
P.O. BOX 565002
ROCKLEDGE FL 32956-5002
US

Mailing Address

P.O. BOX 565002, MS #101
ROCKLEDGE FL 32956-5002



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

03/18/1994

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-3226582

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARMAN, ROBERT O
110 LONGWOOD AVE.
ROCKLEDGE FL 32955

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME D
BRODNAN, SUSAN
STREET ADDRESS 1531 N. INDIAN RIVER DR.
CITY-ST-ZIP COCOA FL 32922

1.1 TITLE Change Addition
1.2 NAME See attached list for
1.3 STREET ADDRESS officers and directors
1.4 CITY-ST-ZIP

TITLE DELETE
NAME D
DAVIES, DAN
STREET ADDRESS 535 DELLANOY AVENUE
CITY-ST-ZIP COCOA FL 32922

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DELETE
NAME D
FIELD, ALMA C
STREET ADDRESS P.O. BOX 843, N/A
CITY-ST-ZIP COCOA FL 32923-0843

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME P
CARMAN, ROBERT O
STREET ADDRESS 110 LONGWOOD AVENUE
CITY-ST-ZIP ROCKLEDGE FL 32955

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert O. Carman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
President

Date

407-636-2211
Daytime Phone #

CR2E037 (11/98)

0020951

WUESTHOFF HEALTH SYSTEMS FOUNDATION, INC.
110 LONGWOOD AVENUE
P.O. BOX 565002 MS #101
ROCKLEDGE, FL 32956-5002

FEI NUMBER 59-3226582

545491-90044-9
N94000001372

LIST OF OFFICERS AND DIRECTORS:

VP
SIMMS, PENELLA
110 LONGWOOD AVENUE, MS#18
ROCKLEDGE, FL 32955

P
CARMAN, ROBERT O.
110 LONGWOOD AVENUE, MS#1
ROCKLEDGE, FL 32955

T
COLKER, REBECCA M.
110 LONGWOOD AVENUE, MS#19
ROCKLEDGE, FL 32955

S
HOUSER, CHARLOTTE
1005 CARRIGAN BLVD.
MERRITT ISLAND, FL 32952

C
MOLITOR, JUDY
1171 N. INDIAN RIVER DRIVE
COCOA, FL 32926

VC
KLINE, KEN
775 E. MERRITT ISLAND CAUSEWAY #300
MERRITT ISLAND, FL 32952

D
CLARKE, DEBRA
7155 SOUTH TROPICAL TRAIL
MERRITT ISLAND, FL 32952

D
CAMPBELL, W. DAVID, DPM
2404 N. COURTNEY PKWY.
MERRITT ISLAND, FL 32953

D
CLARK, PATSY
611 ROCKLEDGE DRIVE
ROCKLEDGE, FL 32955

D
BRODNAN, SUSAN P.
1531 N. INDIAN RIVER DRIVE
COCOA, FL 32922

D
PANOUSES, KURT D., ESQ.
PO BOX 033148
INDIALANTIC, FL 32903-3148

D
DAVIES, DAN R., CPA
535 DELLANOY AVENUE
COCOA, FL 32922

D
EDWARDS, PAT
1475 N. FRIDAY ROAD
COCOA, FL 32926

D
HALEY, MYRA
400 SAINT ANDREWS BLVD.
MELBOURNE, FL 32940

D
LAHAM, JAMES, CPA
320 FORTENBERRY ROAD
MERRITT ISLAND, FL 32952

D
STAUB, DOROTHY
175 VIA DE LA REINA
MERRITT ISLAND, FL 32953

D
ROSE, BOONE JR.
1663 FRONTIER DRIVE
MELBOURNE, FL 32940

D
FIELD, ALMA CLYDE
P.O. BOX 843
COCOA, FL 32923-0843

D
HUFF, A. SCOTT, CLU, Ch.F.C.
2351 W. EAU GALLIE BLVD, SUITE 1
EAU GALLIE, FL 32935

D
MESSERSMITH, DONALD P., M.D.
80 FORTENBERRY ROAD
MERRITT ISLAND, FL 32952

D
RUSSELL, GILBERT A.
320 FORTENBERRY ROAD
MERRITT ISLAND, FL 32952

D
SULLIVAN, FRANK III
P.O. BOX 10
COCOA, FL 32922

D
RICE, PHYLLIS
800 SWITCHGRASS ISLAND ROAD
COCOA, FL 32926

D
TRAFFORD, AL
P.O. BOX 1999
COCOA, FL 32923-1999

D
VITAS, OVID E., M.D.
3740 OCEAN BEACH BOULEVARD, #502
COCOA BEACH, FL 32931