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Apr 08 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000005979 (8)

1. Corporation Name

VOLUNTEER AUXILIARY, INC. OF PLANTATION GENERAL
HOSPITAL

Principal Place of Business

Mailing Address

401 N.W. 42ND AVENUE
PLANTATION FL 33317

401 N.W. 42ND AVENUE
PLANTATION FL 33317-2835



3. Date Incorporated or Qualified
01/01/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number

65-0632480

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GASSEW, LIZ
401 N.W. 42ND AVENUE
PLANTATION FL 33317

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

TITLE P
NAME KRULICK, ELAINE
STREET ADDRESS 5850 N.W. 44TH STREET
CITY-ST-ZIP LAUDERHILL FL 33319 ☒ DELETE

TITLE P
NAME FRIEBRUN, BENNETT
STREET ADDRESS 120 S.W. 96TH TERRACE
CITY-ST-ZIP PLANTATION FL 33324 ☒ DELETE

TITLE S
NAME GLADSTONE, IRMA
STREET ADDRESS 4750 N.W. 21ST STREET
CITY-ST-ZIP LAUDERHILL FL 33313 ☐ DELETE

TITLE S
NAME MARKS, ETHEL
STREET ADDRESS 551 N.W. 42ND AVENUE
CITY-ST-ZIP PLANTATION FL 33317 ☐ DELETE

TITLE T
NAME MAYMON, ELAINE
STREET ADDRESS 3301 N.W. 47TH TERRACE
CITY-ST-ZIP LAUDERDALE LAKES FL 33319 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME FRIEBRUN, BENNETT
1.3 STREET ADDRESS 120 S.W. 96TH TERRACE
1.4 CITY-ST-ZIP PLANTATION, FL 33324 ☒ Change ☐ Addition

2.1 TITLE Y
2.2 NAME CRISPANO, JEAN
2.3 STREET ADDRESS 500 S.W. 169TH AVENUE
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL. 33326 ☒ Change ☐ Addition

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

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

5.1 TITLE T
5.2 NAME RHODES, MARTIN
5.3 STREET ADDRESS 9365 CHELSEA DRIVE S.
5.4 CITY-ST-ZIP PLANTATION, FL. 33324 ☒ Change ☐ Addition

6.1 TITLE Y
6.2 NAME RIFFNER, PAULINE
6.3 STREET ADDRESS 4636 N.W. 44TH COURT
6.4 CITY-ST-ZIP TAMARAC, FL. 33319 ☒ Change ☐ Addition

14. I do 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.

SIGNATURE: Sandra B. Mortham, Secretary of State, 3/31/97 (957) 587-6710

CR2E037 (9/96)