2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03188

FILED Jul 05, 2007 Secretary of State

Entity Name: DEBORAH HOSPITAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

212 TRENTON ROAD/CYMROT CENTER 20 PINE MILLROAD

BROWN MILLS, NJ 08015 BROWN MILLS, NJ 08015

Current Mailing Address: New Mailing Address:

212 TRENTON ROAD/CYMROT CENTER 20 PINE MILL ROAD

BROWN MILLS, NJ 08015 BROWN MILLS, NJ 08015

FEI Number: 22-2049500 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BLOOM, RITA THE ATRIUM FINANCIAL CENTER 1515 NORTH FEDERAL HIGHWAY, SUITE 219 BOCA RATON, FL 33432 US

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete ERNST, JOHN ERNST, JOHN Name: Name: TRENTON ROAD Address: 200 TRENTON ROAD Address:

City-St-Zip: **BROWNS MILLS, NJ** City-St-Zip: **BROWNS MILLS, NJ**

Title: COO Title: COO () Delete (X) Change () Addition HADLEY, JAY Name: HADLEY, JAY Name:

Address: TRENTON ROAD Address: 20 PINE MILL ROAD City-St-Zip: BROWNS MILLS, NJ 08015 City-St-Zip: BROWNS MILLS, NJ 08015

Title: DOF () Delete Title: DOF (X) Change () Addition

NASTO, CHRISTOPHER Name: NASTO, CHRISTOPHER Name: Address: TRENTON ROAD Address: 200 TRENTON ROAD City-St-Zip: BROWNS MILLS, NJ 08015 City-St-Zip: BROWNS MILLS, NJ 08015

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: CHRISTOPHER NASTO DOF 07/05/2007