

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000120879

FILED  
Apr 08, 2011  
Secretary of State

**Entity Name:** SAFETY NET HOSPITAL ALLIANCE SERVICE CORPORATION

**Current Principal Place of Business:**

101 NORTH GADSDEN STREET  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

101 NORTH GADSDEN STREET  
TALLAHASSEE, FL 32301

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

DELEGAL, MARK K  
215 S. MONROE STREET  
SECOND FLOOR  
TALLAHASSEE, FL 32301 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: D  
Name: HYTOFF, RONALD A  
Address: 2 COLUMBIA DRIVE, SUITE A109  
City-St-Zip: TAMPA, FL 33606

Title: D  
Name: FEASEL, JEFF  
Address: 303 N. CLYDE MORRIS BLVD.  
City-St-Zip: DAYTONA BEACH, FL 32124

Title: D  
Name: SONENRIECH, STEVEN  
Address: 4300 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D  
Name: HILLENMEYER, JOHN W  
Address: 1414 KUHL AVENUE  
City-St-Zip: ORLANDO, FL 32806

Title: D  
Name: GWEN, MACKENZIE  
Address: 1700 S. TAMIAMI TRAIL  
City-St-Zip: SARASOTA, FL 34239

Title: US  
Name: CARNES, GARY A  
Address: 801 6TH STREET SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33701

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK K. DELEGAL

RA

04/08/2011

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

\_\_\_\_\_  
Date