## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33442

FILED Feb 27, 2012 Secretary of State

Entity Name: THE CLEVELAND CLINIC FOUNDATION, NONPROFIT CORPORATION

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

9500 EUCLID AVENUE H-18

CLEVELAND, OH 44195

Current Mailing Address: New Mailing Address:

9500 EUCLID AVENUE H-18

CLEVELAND, OH 44195

FEI Number: 34-0714585 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: CD

Name: RICH, ROBERT E JR.
Address: 9500 EUCLID AVENUE
City-St-Zip: CLEVELAND, OH 44195

Title: S

Name: ROWAN, DAVID W
Address: 9500 EUCLID AVENUE
City-St-Zip: CLEVELAND, OH 44194

Title:

Name: HAHN, JOSEPH F MD Address: 9500 EUCLID AVENUE City-St-Zip: CLEVELAND, OH 44195

Title: CEOD

Name: COSGROVE, DELOS M M.D.
Address: 9500 EUCLID AVENUE, H-18
City-St-Zip: CLEVELAND, OH 44195

Title: COO

Name: WILLIAM, PEACOCK
Address: 9500 EUCLID AVENUE, H-18
City-St-Zip: CLEVELAND, OH 44195

Title: CFC

Name: GLASS, STEVEN C

Address: 9500 EUCLID AVENUE, H-18 City-St-Zip: CLEVELAND, OH 44195

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

SIGNATURE: DAVID W. ROWAN S 02/27/2012