2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2023
Secretary of State
9734530545CC

DOCUMENT# 700950

Entity Name: FLAGLER HOSPITAL, INC.

Current Principal Place of Business:

400 HEALTH PARK BLVD.
ST. AUGUSTINE, FL 32086

Current Mailing Address:

ATTN: LEGAL DEPARTMENT
100 WHETSTONE PLACE SUITE 203
ST. AUGUSTINE, FL 32086 US

FEI Number: 59-0675143

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERRY, JILL
100 WHETSTONE PLACE
SUITE 203
ST. AUGUSTINE, FL 32086 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: JILL BERRY 02/03/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D
Name	STANSEL, SUSAN
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	D
Name	TAYLOR, KAREN
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	DIRECTOR
Name	SOROKA, STUART DR.
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	DIRECTOR, SECRETARY
Name	FRANKLIN, FRED D JR.
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	D, TREASURER
Name	ABARE, WILLIAM
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	D
Name	TUCKER, LEN
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	D
Name	WEEKS, LEN
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	DIRECTOR, VC
Name	KAMIENSKI, CHRIS
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

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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: CARLTON DEVOOGHT EX OFFICIO 02/03/2023

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MATUZA, RAY
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	EX OFFICIO
Name	GEORGE, FERRIS
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	DIRECTOR
Name	CRENSHAW, ANDER
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	ASST. SECRETARY
Name	BERRY, JILL
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	EX OFFICIO
Name	DEVOOGHT, CARLTON
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	DIRECTOR, CHAIRMAN
Name	NEVILLE, TODD
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	DIRECTOR
Name	DELANEY, JOHN
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086

Title	CFO
Name	BAILEY, GEORGE THOMAS
Address	400 HEALTH PARK BLVD.
City-State-Zip:	ST. AUGUSTINE FL 32086