

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702779

**Entity Name:** SOUTH LAKE MEMORIAL HOSPITAL INC

**Current Principal Place of Business:**

1900 DON WICKHAM DRIVE  
CLERMONT, FL 34711

**Current Mailing Address:**

1900 DON WICKHAM DRIVE  
CLERMONT, FL 34711

**FEI Number:** 59-0571600

**Certificate of Status Desired:** No

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

SEWELL, LANCE E.  
1900 DON WICKHAM DRIVE  
CLERMONT, FL 34711 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:** LANCE E. SEWELL

04/28/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRUSTEE  
Name BINNEY, CURT  
Address 16324 JOHNS LAKE ROAD  
City-State-Zip: CLERMONT FL 34711

Title PRESIDENT  
Name ROUNTREE, PAUL  
Address 10726 CRESCENT LAKE COURT  
City-State-Zip: CLERMONT FL 34711

Title S  
Name LIMA, ERIKA  
Address 1900 DON WICKHAM DRIVE  
City-State-Zip: CLERMONT FL 34711

Title TRUSTEE  
Name SOLIS, CARLOS  
Address 143 W. MONTROSE STREET  
City-State-Zip: CLERMONT FL 34711

*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:** ERIKA LIMA

SECRETARY

04/28/2023

Electronic Signature of Signing Officer/Director Detail

Date