

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705164

Entity Name: BROWARD HEALTH MEDICAL CENTER AUXILIARY OF FORT LAUDERDALE, FLO RIDA, INC.

Current Principal Place of Business:

1600 S ANDREWS AVE
FT LAUDERDALE, FL 33316

Current Mailing Address:

1600 S ANDREWS AVE
FT LAUDERDALE, FL 33316

FEI Number: 59-0895145

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATTERSON, ROZEN
1600 S ANDREWS AVE
FT LAUDERDALE, FL 33316 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: PATTERSON ROZEN

02/07/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title 2VP
Name BOLES, JUDY
Address 1636 SW 30TH ST
City-State-Zip: FORT LAUDERDALE FL 33315

Title PRESIDENT
Name PATTERSON, ROZEN
Address 1636 SW 30TH ST
City-State-Zip: FORT LAUDERDALE FL 33315

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: ROZEN PATTERSON

PRESIDENT

02/07/2025

Electronic Signature of Signing Officer/Director Detail

Date