#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 708987** 

Entity Name: MORTON PLANT HOSPITAL ASSOCIATION, INC.

FILED
Apr 24, 2017
Secretary of State
CC2387451101

### **Current Principal Place of Business:**

300 PINELLAS STREET CLEARWATER. FL 33756

## **Current Mailing Address:**

300 PINELLAS STREET CLEARWATER, FL 33756 US

FEI Number: 59-0624462 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

BAYCARE HEALTH SYSTEM, INC. ATTENTION: LEGAL SERVICES DEPARTMENT 2985 DREW STREET CLEARWATER, FL 33759 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: SCOTT A. KIZER 04/24/2017

Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title **PRESIDENT** Title VICE CHAIR Name WATERS, GLENN Name LANCASTER, GAY Address 2985 DREW STREET Address 300 PINELLAS STREET CLEARWATER FL 33756 City-State-Zip: City-State-Zip: CLEARWATER FL 33759

Title CHAIR Title TREASURER

NameCANTONIS, JAMESNameWHIDDON, THOMASAddress300 PINELLAS STREETAddress300 PINELLAS STREETCity-State-Zip:CLEARWATER FL 33756City-State-Zip:CLEARWATER FL 33756

Title SECRETARY

Name ERICKSON, KURT MD
Address 300 PINELLAS STREET
City-State-Zip: CLEARWATER FL 33756

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: GLENN WATERS PRESIDENT 04/24/2017

Date