

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718695

Entity Name: TARPON SPRINGS HOSPITAL FOUNDATION, INC.**Current Principal Place of Business:**1395 SOUTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689**Current Mailing Address:**1395 SOUTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689 US**FEI Number:** 59-0898901**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHUMAN, JESSICA
1395 SOUTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689 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:** JESSICA SCHUMAN

01/17/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VC
Name KOUSKOUTIS, MICHAEL ESQ
Address 623 E. TARPON AVENUE
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name CARSON, THOMAS MD
Address 1259 S. PINELLAS AVENUE
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name DIDENKO, DIMA
Address 3100 E. FLETCHER AVENUE
City-State-Zip: TAMPA FL 33613

Title DIRECTOR
Name MATHUR, RAJ MD
Address 1395 SOUTH PINELLAS AVENUE
City-State-Zip: TARPON SPRINGS FL 34689

Title CHAIRMAN
Name BERGHERM, BRUCE
Address 14055 RIVEREDGE DRIVE
SUITE 250
City-State-Zip: TAMPA FL 33637

Title DIRECTOR
Name SCHIEFER, MARK
Address 11530 BIDDEFORD PLACE
City-State-Zip: NEW PORT RICHEY FL 34654

Title DIRECTOR
Name WILLIAMS, PATRICIA
Address 1395 SOUTH PINELLAS AVENUE
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name JOHNSON, JOE
Address 1395 SOUTH PINELLAS AVENUE
City-State-Zip: TARPON SPRINGS FL 34689

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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: JACK BUTCHER**SECRETARY**

01/17/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ADAMS, BRIAN
Address 1395 SOUTH PINELLAS AVENUE
City-State-Zip: TARPON SPRINGS FL 34689

Title TREASURER
Name SELLEW, ROGER
Address 1395 SOUTH PINELLAS AVENIE
City-State-Zip: TARPON SPRINGS FL 34689

Title SECRETARY
Name BUTCHER, JACK
Address 1395 SOUTH PINELLAS AVENUE
City-State-Zip: TARPON SPRINGS FL 34689