

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723106

Entity Name: INDIAN RIVER HOSPITAL FOUNDATION, INC.

Current Principal Place of Business:

1000 36TH STREET
VERO BEACH, FL 32960

Current Mailing Address:

1000 36TH STREET
VERO BEACH, FL 32960 US

FEI Number: 59-0760215

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DONNA MOCH

04/19/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GULLQUIST, HERBERT
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name KEMP III, JOHN B.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name LAFAGE, JUDITH
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name MILSTEN, RICHARD M.D.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name MUNN, WILLIAM H.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name O'BRIEN, KATHLEEN C.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name POTTER, MARY
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name ROHRBACH, N. JACK
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

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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: PAMELA J. SHEIFFER

SECRETARY

04/19/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RUNDELS, MATTHEW
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name SHEIFFER, PAMELA J.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name GAHAN, DELORES R. M.D.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name STRUTHERS, HARVEY J. JR.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name WOODRUFF, ANTHONY C.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title CHAIRMAN
Name LAFAGE, JUDITH
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name FEINOUR, EUGENE P.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name OGLESBY, MARION B
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title VC
Name TANSILL, DOUGLAS T.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name BARROW, CHRISTOPHER T.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title VC
Name CLIFFORD, J. CHRISTOPHER

Title DIRECTOR
Name SCOVILLE, ROGER
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name COTTER, E. ROBERT
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name CLIFFORD, J. CHRISTOPHER
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name TANSILL, DOUGLAS T.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title CHAIRMAN EMERITUS
Name WOODRUFF, ANTHONY C.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name CRAIN, MARY KAY
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name JONES, STEPHEN C.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name SOLOMON, SUSAN R.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name ALLEX, PATRICIA A.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title SECRETARY
Name SHEIFFER, PAMELA J.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title ASSISTANT SECRETARY
Name BROWN, SHERRY
Address 1000 36TH STREET

Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
NameBIERSACH, WILLIAM D.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title ASSISTANT SECRETARY
NameSTRUTHERS, HARVEY J. JR.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title ASSISTANT TREASURER
NameGULLQUIST, HERBERT
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
NameBROWN, KATHRYN
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title VICE PRESIDENT AND CMO
NamePETER, DAVID M.D.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
NameCOSTELLO, JOHN H.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
NameBLANCHARD, ELIZABETH W.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title TREASURER
NameMUNN, WILLIAM H.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
NameBLANCHARD, JOHN
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
NameBROWN, SHERRY
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
NameCAREY, WENDY G.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
NameHURTT, STEPHANIE P.
Address 1000 36TH STREET
City-State-Zip: VERO BEACH FL 32960