

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732358

Entity Name: MEMORIAL REGIONAL HOSPITAL SOUTH AUXILIARY, INC.

Current Principal Place of Business:

3600 WASHINGTON STREET
HOLLYWOOD, FL 33021

Current Mailing Address:

3600 WASHINGTON STREET
HOLLYWOOD, FL 33021 US

FEI Number: 59-1632083

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARTLEY, CAROL A
3600 WASHINGTON STREET
HOLLYWOOD, FL 33021 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name SILVER, MARCIA
Address 3501 JOHNSON ST
City-State-Zip: HOLLYWOOD FL 33021

Title PE
Name LEVIN, MARCIA
Address 3501 JOHNSON ST
City-State-Zip: HOLLYWOOD FL 33021

Title 1VP
Name GRAY, JAN
Address 3501 JOHNSON ST
City-State-Zip: HOLLYWOOD FL 33021

Title T
Name BARTLEY, CAROL A
Address 3600 WASHINGTON STREET
City-State-Zip: HOLLYWOOD FL 33021

Title SEC
Name GREENE, NANCY
Address 3501 JOHNSON ST
City-State-Zip: HOLLYWOOD FL 33021

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: CAROL BARTLEY

TREASURER

02/06/2014

Electronic Signature of Signing Officer/Director Detail

Date