2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2023
Secretary of State
7346760343CC

DOCUMENT# 760386

Entity Name: LEHIGH HOSPITAL AUXILIARY, INC.

Current Principal Place of Business:

1500 LEE BLVD
LEHIGH ACRES, FL 33936

Current Mailing Address:

1500 LEE BLVD
LEHIGH ACRES, FL 33936 US

FEI Number: 59-2190899

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEHIGH REGIONAL MEDICAL CENTER
1500 LEE BLVD
LEHIGH ACRES, FL 33936 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: KAREN NICHOLS 04/01/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR	Title	RECORDER
Name	COLLINS, AARNOLD	Name	BYINGTON, BARB
Address	1500 LEE BLVD	Address	1500 LEE BLVD
City-State-Zip:	LEHIGH ACRES FL 33936	City-State-Zip:	LEHIGH ACRES FL 33936

Title	MANAGER
Name	BALL, JOEL E
Address	301 E 9TH STREET
City-State-Zip:	LEHIGH ACRES FL 33972

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: BALL, JOEL E MANAGER 04/01/2023

Electronic Signature of Signing Officer/Director Detail — Date