

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006456

Entity Name: COMMUNITY HEALTH TRUST, INC

Current Principal Place of Business:

7900 NW 27TH AVE
STE 70
MIAMI, FL 33147

FILED
Jan 17, 2014
Secretary of State
CC8735494498

Current Mailing Address:

1744 NW 192ND ST.
MIAMI GARDENS, FL 33056

FEI Number: 59-3674428

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PASCHAL, III, FLETCHER A
1744 NW 192 ST
OPA LOCKA, FL 33056 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 PSTD
Name JOHNSON, LENORA P
Address P O BOX 370608
City-State-Zip: MIAMI FL 33137

Title S
Name PASCHAL, FLETCHER AIV
Address 1744 NORTHWEST 192ND STREET
City-State-Zip: MIAMI FL 33056

Title D
Name POWELL, AGENORIA
Address 1744 NORTHWEST 192ND STREET
City-State-Zip: MIAMI FL 33056

Title C
Name THEOC, ERNST
Address 1744 NW 192ND ST
City-State-Zip: MIAMI FL 33056

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: FLETCHER PASCHAL

SECRETARY

01/17/2014

Electronic Signature of Signing Officer/Director Detail

Date