

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07689

Entity Name: UNIVERSITY COMMUNITY HOSPITAL FOUNDATION, INC.**Current Principal Place of Business:**3100 E FLETCHER AVE
TAMPA, FL 33613**Current Mailing Address:**3100 E FLETCHER AVE
TAMPA, FL 33613 US**FEI Number: 59-2554889****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WILTSE, KATHYRN
3100 E. FLETCHER AVE.
TAMPA, FL 33613 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 CHAIRMAN
Name MEYER, FRED
Address 711 GUI SANDO DE AVILLA
City-State-Zip: TAMPA FL 33613

Title TRUSTEE
Name ADAIR, DARBRA
Address 30304 LAURELWOOD LANE
City-State-Zip: WESLEY CHAPEL FL 33543

Title TRUSTEE
Name BECKENSTEIN, CHARLES MD
Address 610 S. ROME AVENUE
SUITE 602
City-State-Zip: TAMPA FL 33606

Title TRUSTEE
Name DONOVAN, GINA G
Address 8724 PALISADES
City-State-Zip: TAMPA FL 33615

Title TRUSTEE
Name STONESIFER, KURT MD
Address 16201 SENTRY WOODS COURT
City-State-Zip: ODESSA FL 33556

Title TRUSTEE
Name AZZARELLI, ELENA
Address 16604 MILLAN DE AVILA
City-State-Zip: TAMPA FL 33613

Title TRUSTEE
Name CHANDRA, SUMESH MD
Address 16116 LAKE MAGDALENE BLVD.
City-State-Zip: TAMPA FL 33613

Title TRUSTEE
Name FERLITA, ANGIE
Address 9923 STOCKBRIDGE DRIVE
City-State-Zip: TAMPA FL 33626

Continues on page 2

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: FRED MEYER**CHAIRMAN****02/19/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name GILLIS, JACK
Address 5406 BLUE HERON LANE
City-State-Zip: WESLEY CHAPEL FL 33543

Title TRUSTEE
Name LAY, STEVE MD
Address 8502 LAYS COVE PLACE
City-State-Zip: ODESSA FL 33556

Title TRUSTEE
Name MOORE, JULIE
Address 120 LAKE DRIVE WEST
City-State-Zip: LUTZ FL 33549

Title TRUSTEE
Name SIERRA, SEBRING
Address 509 GUISANDO DE AVILA
SUITE 200
City-State-Zip: TAMPA FL 33613

Title TRUSTEE
Name TAYLOR, TODD
Address 1035 GUISANDO DE AVILA
City-State-Zip: TAMPA FL 33613

Title TRUSTEE
Name WILLIAMS, GARY
Address 16215 BONNEVILLE DRIVE
City-State-Zip: TAMP FL 33624

Title TRUSTEE
Name JOYCE, ROGER
Address 30214 LAURELWOOD LANE
City-State-Zip: WESLEY CHAPEL FL 33543

Title TRUSTEE
Name MCPHAIL, MARILYN
Address POST OFFICE BOX 271754
City-State-Zip: TAMPA FL 33688

Title TRUSTEE
Name ROMANO, JASON
Address 2501 CHAPEL WAY
City-State-Zip: TAMPA FL 33618

Title TRUSTEE
Name SMITH, DINA S
Address 1128 FLORES DE AVILA
City-State-Zip: TAMPA FL 33613

Title TRUSTEE
Name TEDROW, JANET
Address 1707 MILL RUN CIRCLE
City-State-Zip: 33613 FL

Title TRUSTEE
Name ZWIRN, J.J.
Address 2525 COZUMEL
City-State-Zip: TAMPA FL 33613