

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000004790

Entity Name: ST. MARY'S HEALING CENTER OF STUART, INC.

Current Principal Place of Business:

623 SE OCEAN BOULEVARD
STUART, FL 34994

FILED
Jun 22, 2020
Secretary of State
7860046577CC

Current Mailing Address:

623 SE OCEAN BLVD
STAURT, FL 34994

FEI Number: 82-2280467

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EARLE, DAVID
789 S.W. FEDERAL HIGHWAY
SUITE 101
STUART, FL 34994 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 CEDERBERG, TODD
Address 623 SE OCEAN BLVD.
City-State-Zip: STUART FL 34994

Title VP
Name PECK, KARLETTE
Address 623 SE OCEAN BLVD.
City-State-Zip: STUART FL 34994

Title SECRETARY
Name LINDSEY, KAREN
Address 623 SE OCEAN BLVD.
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name VRECHEK, NANCY
Address 623 SE OCEAN BLVD.
City-State-Zip: STUART FL 34994

Title TREASURER
Name GEIGER, DWIGHT
Address 623 SE OCEAN BOULEVARD
City-State-Zip: STUART FL 34994

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: DWIGHT GEIGER

TREASURER

06/22/2020

Electronic Signature of Signing Officer/Director Detail

Date