2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 22, 2025
Secretary of State
6656600443CC

DOCUMENT# N17000009607

Entity Name: FLORIDA HOSPITAL DADE CITY, INC.

Current Principal Place of Business:

13100 FORT KING ROAD
DADE CITY, FL 33525

Current Mailing Address:

13100 FORT KING ROAD
DADE CITY, FL 33525 US

FEI Number: 82-2567308

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHUMAN, JESSICA
14055 RIVEREDGE DR
SUITE 250
TAMPA, FL 33637 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: JESSICA SCHUMAN 04/22/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	ASSISTANT SECRETARY
Name	ADDISCOTT, LYNN
Address	900 HOPE WAY
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	ASSISTANT SECRETARY
Name	FOLTZ, ROBERT
Address	26300 SIENA DR.
City-State-Zip:	BONITA SPRINGS FL 34134

Title	ASSISTANT SECRETARY
Name	RATHBUN, PAUL
Address	900 HOPE WAY
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	ASSISTANT SECRETARY
Name	BRADY, AMANDA
Address	900 HOPE WAY
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	ASSISTANT SECRETARY
Name	VINCENT, HANEY
Address	900 HOPE WAY
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	ASSISTANT SECRETARY
Name	GRAFF, JEFFREY
Address	900 HOPE WAY
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	ASSISTANT SECRETARY
Name	SAUNDERS, MICHAEL
Address	900 HOPE WAY
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	ASSISTANT SECRETARY
Name	HUFFMAN, DAVID
Address	900 HOPE WAY
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

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: TONI BERRIOS ASSISTANT SECRETARY 04/22/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR
Name AGUAYO, EDWIN
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name BRADLEY, KENNETH
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR
Name CHAN, RANIER DR.
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name MAGGARD, DALE
Address 12400 TRADITION DR.
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name SCOTT, JOHN
Address 7050 GALL VLVD.
City-State-Zip: ZEPHYRHILLS FL 33541

Title DIRECTOR
Name PICHETTE, RAYMOND
Address 3100 E. FLETCHER AVE. TAMPA
City-State-Zip: TAMPA FL 33613

Title ASSISTANT SECRETARY
Name BERRIOS, TONI
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR
Name BROWN, ROYCE
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title CHAIRMAN
Name WANDERSLEBEN, JENNIFER
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name ABDULLAH, SAIF DR.
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR
Name GADDIS, REBECCA
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name CAMERON, SCOTT
Address 1695 VIRGINIA LEE AVENUE
City-State-Zip: BROOKSVILLE FL 34602

Title DIRECTOR
Name HAUFF, LEROY
Address 13435
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name OLIVER, ROSALIE
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name BELCHER, RANDALL
Address 18340 MT. OLIVE DR.
City-State-Zip: DADE CITY FL 33523

Title ASSISTANT SECRETARY
Name BANKS, DAVID
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR
Name BARRIFFE, MELANIE
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR, PRESIDENT, SECRETARY
Name MURRILL, MICHAEL
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name SIMPSON MONBARREN, LAUREN
Address 13100 FORT KING ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name JAILWALA, NISHIT DR.
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714