

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19520

Entity Name: MORSELIFE HEALTH SYSTEM, INC.**Current Principal Place of Business:**4847 DAVID S. MACK DRIVE
WEST PALM BEACH, FL 33417**Current Mailing Address:**4847 DAVID S. MACK DRIVE
WEST PALM BEACH, FL 33417 US**FEI Number:** 65-0018299**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MYERS, KEITH A
4847 DAVID S. MACK DRIVE
WEST PALM BEACH, FL 33417 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 CFO
Name CHAE, HONG
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title VC
Name MACK, DAVID S.
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title VC
Name SRIBERG, TERRI
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name GREENBAUM, RYNA
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title CHAIRMAN
Name LEVIN, STEPHEN A.
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title TREASURER
Name RUBENSTEIN, MITCHELL
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title SECRETARY
Name MEISTER, ROBERT A.
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name JACOBS, JOSEPH
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

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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: HONG CHAE

CFO

04/24/2019

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JAFFE, ROBERT
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name LORING, ARTHUR S.
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name PANTZER, EDWARD
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR EMERITUS
Name SLIFKA, GILDA
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR EMERITUS
Name BLOCH, BEATRICE
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name SHARF, JEAN
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name KATZ, STANLEY
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name MARGOLIS, MICHAEL
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name SCHLAGER, S. LAWRENCE
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR EMERITUS
Name SILVERMAN YASHAR, LOIS
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title PRESIDENT/CEO
Name MYERS, KEITH
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR
Name SIRULNICK, SANFORD
Address 4847 DAVID S. MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417