

2024 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:**CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL 32303 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	WOLAN, RANDY
Address	4847 DAVID S. MACK DRIVE
City-State-Zip:	WEST PALM BEACH FL 33417

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

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

Title	DIRECTOR
Name	RUBENSTEIN, MITCHELL
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

Title	DIRECTOR
Name	KATZ, STANLEY
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: KEITH MYERS**CEO****04/09/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

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

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

Title VC
Name MARGOLIS, MICHAEL
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

Title TREASURER/SECRETARY
Name CRAWFORD, CAROL
Address 4847 DAVID S MACK DRIVE
City-State-Zip: WEST PALM BEACH FL 33417