

2025 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 DIRECTOR
Name KATZ, STANLEY
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 VC
Name LEVIN, STEPHEN A.
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 LORING, ARTHUR S.
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

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: RANDY WOLAN**CFO****05/01/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title DIRECTOR
Name KAYE, HOWARD
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

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