

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N49760

Entity Name: FLORIDA HOSPITAL WATERMAN, INC.

Current Principal Place of Business:

1000 WATERMAN WAY
TAVARES, FL 32778

Current Mailing Address:

1000 WATERMAN WAY
TAVARES, FL 32778 US

FEI Number: 59-3140669

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROMME, JEFF
900 HOPE WAY
ALTAMONTE SPRINGS, FL 32714 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 AS
Name VINCENT, HANEY
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714

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

Title DIRECTOR
Name HOWARD, BARBARA
Address 9501 US HWY 441
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name WEISS, DAVID
Address 252 W. ARDICE AVENUE
SUITE 402
City-State-Zip: EUSTIS FL 32726

Title DIRECTOR
Name WERNER, THOMAS
Address 1670 CR 452
City-State-Zip: EUSTIS FL 32726

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

Title CHAIRPERSON, DIRECTOR
Name GREGORY, AUDREY
Address 100 WATERMAN WAY
City-State-Zip: TAVARES FL 32778

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

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 04/20/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title ASST. SECRETARY
 Name GOODMAN, TODD
 Address 601 E. ROLLINS
 City-State-Zip: ORLANDO FL 32803

Title PRESIDENT, DIRECTOR
 Name BIRI, ABEL
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name PILLOW, STEVEN DR.
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title ASSISTANT SECRETARY
 Name BRADY, AMANDA
 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

Title DIRECTOR
 Name GOEB-BURKETT, MICHELLE
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name DAVID, P BARTLETT
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name JEAN-PIERRE, MARLYNE
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name SMOLTER, D.O., PATRICIA
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title ASSISTANT SECRETARY
 Name BERRIOS, TONI

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

Title DIRECTOR
 Name CADDELL, SUSAN DDS
 Address P. O. BOX 677
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name DEVOS, CYNTHIA
 Address 701 BIESTERFIELD ROAD
 City-State-Zip: ELK GROVE VILLAGE IL 60007

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

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

Title DIRECTOR
 Name FOUNTAIN, MICHAEL
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name MAZENKO, TODD
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name NOSEWORTHY, EDWARD
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name SIMONS, PAM
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Title DIRECTOR
 Name CURET, SHARLENE
 Address 1000 WATERMAN WAY
 City-State-Zip: TAVARES FL 32778

Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714