2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2013
Secretary of State
CC7723710498

DOCUMENT# N95000003610

Entity Name: HEALTH FIRST, INC.

Current Principal Place of Business:

6450 US HIGHWAY 1
ROCKLEDGE, FL 32955

Current Mailing Address:

6450 US HIGHWAY 1
ATTENTION: CORPORATE LEGAL
ROCKLEDGE, FL 32955 US

FEI Number: 59-3336894

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATHIAS, DAVID E
6450 US HIGHWAY 1
ROCKLEDGE, FL 32955 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	PRESIDENT, DIRECTOR
Name	JOHNSON, STEVEN P
Address	6450 US HIGHWAY 1
City-State-Zip:	ROCKLEDGE FL 32955

Title	VP, ASST. SECRETARY
Name	MATHIAS, DAVID E
Address	6450 US HIGHWAY 1
City-State-Zip:	ROCKLEDGE FL 32955

Title	TREASURER, DIRECTOR
Name	STEELE, KEVIN B
Address	6450 US HIGHWAY 1
City-State-Zip:	ROCKLEDGE FL 32955

Title	CHAIRMAN, DIRECTOR
Name	SHAW, JAMES C
Address	6450 US HIGHWAY 1
City-State-Zip:	ROCKLEDGE FL 32955

Title	VP
Name	RECTOR, DREW A
Address	6450 US HIGHWAY 1
City-State-Zip:	ROCKLEDGE FL 32955

Title	VP
Name	FELKNER, JOSEPH G
Address	6450 US HIGHWAY 1
City-State-Zip:	ROCKLEDGE FL 32955

Title	SECRETARY, DIRECTOR
Name	CAVALLUCCI, EUGENE S
Address	6450 US HIGHWAY 1
City-State-Zip:	ROCKLEDGE FL 32955

Title	VC
Name	FORD, CATHERINE A
Address	6450 US HIGHWAY 1
City-State-Zip:	ROCKLEDGE FL 32955

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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: STEVEN P. JOHNSON PRESIDENT 03/20/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title VP, COO
Name MITCHELL, JAMES S III
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title VP
Name GREGORY, SEAN J
Address ATTN: ADMINISTRATION
1350 S HICKORY ST
City-State-Zip: MELBOURNE FL 32901

Title VP
Name RONALDSON, JAMES M M.D.
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name DWIGHT, JAMES
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name GATTO, PAMELA A
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name HOLLINGSWORTH, ABNER T PH.D.
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name MCNEIGHT, RICHARD
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name PICKETT, FRAN U
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name PRUETT, KEVIN S
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title VP
Name WRIGHT, ROBERT R
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title VP
Name SUTTLES, ROBERT W
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name BUSSEN, BRIAN J
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name EDDY, CATHY K
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name HAGEN, DONALD F M.D.
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name ISENMAN, MARTIN W M.D.
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name PELLEGRINO, NICHOLAS E
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name POTTER, WILLIAM C
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name ROUB, BRYAN R
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955