

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N96000004380

Entity Name: CLEVELAND CLINIC WESTON HOSPITAL NONPROFIT CORPORATION

FILED
Apr 28, 2023
Secretary of State
3528870987CC

Current Principal Place of Business:

2950 CLEVELAND CLINIC BOULEVARD
WESTON, FL 33331

Current Mailing Address:

2950 CLEVELAND CLINIC BOULEVARD
WESTON, FL 33331 US

FEI Number: 65-0844880

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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
Name BLANDON, RODOLFO M.D.
Address 2950 CLEVELAND CLINIC
 BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name SALERNO, FREDERIC
Address 2950 CLEVELAND CLINIC
 BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name DELANEY, CONOR M.D., PH.D.
Address 2950 CLEVELAND CLINIC
 BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name HAMMES, MICHAEL
Address 2950 CLEVELAND CLINIC
 BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name IANNOTTI, JOSEPH M.D., PH.D.
Address 2950 CLEVELAND CLINIC
 BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name LANG, SEAN
Address 2950 CLEVELAND CLINIC
 BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name LICHTENBERGER, WILLIAM
Address 2950 CLEVELAND CLINIC
 BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name MACDONALD, WILLIAM E. III
Address 2950 CLEVELAND CLINIC
 BOULEVARD
City-State-Zip: WESTON FL 33331

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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: DAVID ROWAN

SECRETARY

04/28/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MAROONE, MICHAEL E.
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name MIHALJEVIC, TOMISLAV M.D.
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name PETRAS, MICHAEL B. JR.
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name RYAN, PATRICK JR.
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name WEBB, THEORA
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title CHIEF OF OPERATIONS, FLORIDA
Name CATO, DAVID
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title SECRETARY
Name ROWAN, DAVID
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name MATTERA, VINCENT
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name MOONEY, BETH E.
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name RICH, ROBERT E. JR.
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name SCOTT, HAROLD LEE JR.
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name WEBER, ESQ. ROBERT C.
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331

Title GENERAL COUNSEL AND ASSISTANT SECRETARY
Name DEL CASTILLO, ESQ. BARBARA
Address 2950 CLEVELAND CLINIC BOULEVARD
City-State-Zip: WESTON FL 33331