

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000099858

Entity Name: PALMETTO BAY MEDICAL CENTER, INC.

Current Principal Place of Business:

9765 S.W. 184TH ST.
MIAMI, FL 33157

Current Mailing Address:

9765 S.W. 184TH ST.
MIAMI, FL 33157

FEI Number: 65-1146838

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MINKES, LINDA
9765 S.W. 184TH ST.
MIAMI, FL 33157 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 VPST
Name MINKES, LINDA
Address 9765 S.W. 184TH ST.
City-State-Zip: MIAMI FL 33157

Title D
Name MINKES, LINDA
Address 9765 S.W. 184TH ST.
City-State-Zip: MIAMI FL 33157

Title P
Name MINKES, JULES
Address 9765 S.W. 184TH ST.
City-State-Zip: MIAMI FL 33157

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA MINKES

SECY-TREAS.

01/21/2015

Electronic Signature of Signing Officer/Director Detail

Date