2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002479

Entity Name: VIRGINIA MASON MEDICAL CENTER, CORPORATION

FILED
Apr 30, 2024
Secretary of State
1710276119CC

Current Principal Place of Business:

1100 9TH AVE

SEATTLE. WA 98101-2756

Current Mailing Address:

1100 9TH AVE

SEATTLE. WA 98101-2756 US

FEI Number: 91-0565539 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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	DIRECTOR	Title	DIRECTOR
Name	CORVI, CAROLYN	Name	CARLILE, BOB
Address	1100 9TH AVE	Address	1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756 City-State-Zip: SEATTLE WA 98101-2756

TitleDIRECTORTitleDIRECTOR, VCNameLEE, KARENNameLEMON, ROBERTAddress1100 9TH AVEAddress1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756 City-State-Zip: SEATTLE WA 98101-2756

Title DIRECTOR Title DIRECTOR

Name MEYER, GREGG Name OPPENHEIMER, JOHN

Address 1100 9TH AVE Address 1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756 City-State-Zip: SEATTLE WA 98101-2756

TitleSECRETARYTitleTREASURERNameCHAMBLISS, MIRIAMNameNOSACKA, DAVIDAddress1100 9TH AVEAddress1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756 City-State-Zip: SEATTLE WA 98101-2756

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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 NOSACKA TREASURER 04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR, CHAIRMAN OF THE BOARD

Name CHI, ULI

Address 1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756

Title DIRECTOR

Name GOODWIN, RUTH BETSY

Address 1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756

Title DIRECTOR

Name HUNTHAUSEN, DENNIS

Address 1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756

Title DIRECTOR

Name ARNOLD, CHARLES

Address 1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756

Title DIRECTOR

Name CONNELLY, JUDE

Address 1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756

Title DIRECTOR

Name HAMACHEK, TOD

Address 1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756

Title DIRECTOR

Name PULS, DIANN

Address 1100 9TH AVE

City-State-Zip: SEATTLE WA 98101-2756