2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000004457

Entity Name: HEALTHNETWORK FOUNDATION, INC.

Current Principal Place of Business:

3550 LANDER RD STE 225 PEPPER PIKE, OH 44124

Current Mailing Address:

3550 LANDER RD STE 225 PEPPER PIKE, OH 44124 US

FEI Number: 04-3804600

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

Officer/Director Detail :

Title	CHAIRMAN	Title	BOARD ADVISOR
Name	ROWLEY, WILLIAM W	Name	STEERE, F. WILLIAM
Address	7590 RUNNYMEADE	Address	3550 LANDER RD SUITE 225
City-State-Zip:	CHAGRIN FALLS OH 44022	City-State-Zip:	
Title	CHIEF OP	Title	TRUSTEE
Name	HERCHEK, LISA	Name	BUSA, ANTHONY
Address	17431 BEECH GROVE TRL	Address	30600 SALEM DR.
City-State-Zip:	CHAGRIN FALLS OH 44023		
		City-State-Zip:	BAY VILLAGE OH 44140
Title	TRUSTEE	Title	TRUSTEE
Name	FERNANDEZ, BERNARDO DR.	Name	MCCULLOM, PATRICIA
Address	3550 LANDER RD SUITE 225 PEPPER PIKE OH 44124	Address	3550 LANDER RD SUITE 225
City-State-Zip:		City-State-Zip:	
Title	BOARD ADVISOR	Title	BOARD ADVISOR
Name	KRUL, WILLIAM	Name	BABCOX, WILLIAM
Address	3550 LANDER RD SUITE 225	Address	33 RIVER ST
City-State-Zip:	PEPPER PIKE OH 44124	City-State-Zip:	CHAGRIN FALLS OH 44022

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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: LISA M HERCHEK

Electronic Signature of Signing Officer/Director Detail

FILED Apr 06, 2022 Secretary of State 0141688690CC

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	PRESIDENT	Title	BOARD ADVISOR
Name	FRANKEL, MEGAN	Name	CORNING, DWIGHT B
Address	3550 LANDER RD SUITE 225	Address	3550 LANDER RD SUITE 225
City-State-Zip:	PEPPER PIKE OH 44124	City-State-Zip:	PEPPER PIKE OH 44124
Title	VP	Title	BOARD ADVISOR
Name	KOTORA, KIM	Name	STEERE, BROCK
Address	3550 LANDER RD STE 225	Address	3550 LANDER RD STE 225
City-State-Zip:	PEPPER PIKE OH 44124	City-State-Zip:	PEPPER PIKE OH 44124
Title	BOARD ADVISOR		
Name	GUTTMAN, JOSH		
Address	3550 LANDER RD STE 225		

City-State-Zip: PEPPER PIKE OH 44124