

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000001821

**Entity Name:** THE MOUNT SINAI HOSPITAL, INC.

**Current Principal Place of Business:**

1 GUSTAVE L. LEVY PLACE  
NEW YORK, NY 10029

**Current Mailing Address:**

1 GUSTAVE L. LEVY PLACE  
NEW YORK, NY 10029

**FEI Number: 13-1624096**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND  
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: JENNIFER QUINN**

**05/15/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PCEO  
Name DAVIS, KENNETH  
Address 1 GUSTAVE L. LEVY PLACE  
City-State-Zip: NEW YORK NY 10029

Title EVP  
Name KLEIN, ARTHUR  
Address 1 GUSTAVE L. LEVY PLACE  
City-State-Zip: NEW YORK NY 10029

Title EVP  
Name SCANLON, DONALD  
Address 1 GUSTAVE L. LEVY PLACE  
City-State-Zip: NEW YORK NY 10029

Title EVP  
Name ESSIG, BETH  
Address 1 GUSTAVE L. LEVY PLACE  
City-State-Zip: NEW YORK NY 10029

*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: DONALD SCANLON**

**EVP / CFO**

**05/15/2019**

Electronic Signature of Signing Officer/Director Detail

Date