2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2022
Secretary of State
0089678476CC

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Entity Name: BON SECOURS MERCY HEALTH, INC.

Current Principal Place of Business:

1701 MERCY HEALTH PLACE
CINCINNATI, OH 45237

Current Mailing Address:

1701 MERCY HEALTH PLACE
CINCINNATI, OH 45237 US

FEI Number: 52-1301088

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BOONE, STEPHEN K
1001 AVENIDA DEL CIRCO
VENICE, FL 34285 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
Name	KELLS, GERARD
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	O'BRIEN, JENNIFER
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	ASST. SECRETARY
Name	MORRIS, CHRISTINE
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	PRESIDENT AND CEO/DIRECTOR
Name	STARCHER, JOHN M. JR.
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	VC
Name	MADDOX, PETER F
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	TREASURER
Name	BLOOMFIELD, DEBORAH
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	GORSUCH, FRAN
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	ARBUCKLE, KATHERINE A
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

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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: CHRISTINE O'NEILL SECRETARY 03/02/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ECK, PATRICIA
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	RAJAMANNAR, RAJA
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	SHEEHAN, MYLES N.
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	CHAIRMAN
Name	VESTAL, KATHERINE W. PHD
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	O'SHEA, JOSEPH D
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	GOTTEMOELLER, DORIS
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	REID, JANET B. PHD
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	DIRECTOR
Name	SMITH, CAROL ANNE
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237

Title	SECRETARY
Name	O'NEILL, CHRISTINE
Address	1701 MERCY HEALTH PLACE
City-State-Zip:	CINCINNATI OH 45237