

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004910

FILED
Jan 19, 2010
Secretary of State

Entity Name: OAK HILL HOSPITAL VOLUNTEER ASSOCIATION, INC.

Current Principal Place of Business:

11375 CORTEZ BLVD
SPRING HILL, FL 34613

New Principal Place of Business:

Current Mailing Address:

11375 CORTEZ BLVD
SPRING HILL, FL 34613

New Mailing Address:

FEI Number: 59-2472574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAELIN, DOROTHY M
11375 CORTEZ BOULEVARD
SPRING HILL, FL 34611 US

Name and Address of New Registered Agent:

DIXON, ROBERT A
11375 CORTEZ BOULEVARD
SPRING HILL, FL 34611 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: ROBERT A. DIXON

01/19/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: O
Name: SMITH, MICKEY
Address: 11375 CORTEZ BLVD
City-St-Zip: SPRING HILL, FL 34613

Title: P
Name: DIXON, ROBERT A
Address: 5694 LEGEND HILLS LANE
City-St-Zip: SPRING HILL, FL 34609

Title: V
Name: SOMMERFELD, VIRGINIA C
Address: 8196 BERKELEY MNOR BLVD.
City-St-Zip: SPRING HILL, FL 34606

Title: T
Name: CHISWELL, PHYLLIS M
Address: 5531 LEDGEND HILLS LANE
City-St-Zip: SPRING HILL, FL 34609

Title: S
Name: TRENT, PATRICIA E
Address: 11039 FRIGATE BIRD AVENUE
City-St-Zip: BROOKSVILLE, FL 34613

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: PHYLLIS M. CHISWELL

T

01/19/2010

Electronic Signature of Signing Officer or Director

Date