

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000009482

Entity Name: GUIDEWELL MUTUAL HOLDING CORPORATION**Current Principal Place of Business:**4800 DEERWOOD CAMPUS PARKWAY
JACKSONVILLE, FL 32236**Current Mailing Address:**4800 DEERWOOD CAMPUS PARKWAY
JACKSONVILLE, FL 32236**FEI Number: 46-3949427****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DOERR, CHRIS CFO
4800 DEERWOOD CAMPUS PARKWAY
JACKSONVILLE, FL 32236 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 CEO, CHAIRMAN
Name GERAGHTY, PATRICK J
Address 4800 DEERWOOD CAMPUS PARKWAY
City-State-Zip: JACKSONVILLE FL 32236

Title PRESIDENT
Name LERER, RENE DR.
Address 4800 DEERWOOD CAMPUS PARKWAY
City-State-Zip: JACKSONVILLE FL 32236

Title CFO
Name DIVITA, CHARLES III
Address 4800 DEERWOOD CAMPUS PARKWAY
City-State-Zip: JACKSONVILLE FL 32236

Title SECRETARY
Name JOSEPH, CHARLES S
Address 4800 DEERWOOD CAMPUS PARKWAY
City-State-Zip: JACKSONVILLE FL 32236

Title TREASURER
Name COATS, WILLIAM A
Address 4800 DEERWOOD CAMPUS PARKWAY
City-State-Zip: JACKSONVILLE FL 32236

Title VP
Name HEALY, GARY M
Address 4800 DEERWOOD CAMPUS PARKWAY
City-State-Zip: JACKSONVILLE FL 32236

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: CHARLES S. JOSEPH**SECRETARY****04/13/2015**

Electronic Signature of Signing Officer/Director Detail

Date