

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 720924

FILED  
Apr 11, 2002 8:00 AM  
Secretary of State

**Entity Name:** COMMUNITY HEALTH OF SOUTH DADE, INC.

**Current Principal Place of Business:**

10300 S.W. 216 STREET  
MIAMI, FL 33190

**New Principal Place of Business:**

**Current Mailing Address:**

10300 S.W. 216 STREET  
MIAMI, FL 33190

**New Mailing Address:**

**FEI Number:** 59-1372690

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HARTLEY, BRODES H., JR.  
10300 S W 216 STREET  
MIAMI, FL 33190

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

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

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: BROWN, FRIEDA  
Address: 10370 SW 146 STREET  
City-St-Zip: MIAMI, FL 33176

Title: CD ( ) Delete  
Name: LLANES, CARLOS G  
Address: 1330 CORAL WAY #102  
City-St-Zip: CORAL GABLES, FL 33145

Title: D ( ) Delete  
Name: BROWN, HARRELL,  
Address: 11450 SW 200 ST  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: GARCIA, JUANITA,  
Address: 1758 W MOWRY  
City-St-Zip: HOMESTEAD, FL

Title: D ( ) Delete  
Name: BRADY, LEONARD,  
Address: 9105 NW 25 ST #3089  
City-St-Zip: MIAMI, FL

Title: P ( ) Delete  
Name: HARTLEY, BRODES H JR  
Address: 10300 SW 216 STREET  
City-St-Zip: MAIMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: BRADY, LEONARD,  
Address: 9105 NW 25 ST #3089  
City-St-Zip: MIAMI, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRODES H. HARTLEY, JR.

P

04/11/2002

Electronic Signature of Signing Officer or Director

Date