

733733

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City WEST PALM BEACH State FL ZIP 33401

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (Corporation Name) (Document #)

2. \_\_\_\_\_ (Corporation Name) (Document #) 600003213106--6  
-04/18/00--01097--001  
\*\*\*\*\*770.00 \*\*\*\*\*35.00

3. \_\_\_\_\_ (Corporation Name) (Document #)

4. \_\_\_\_\_ (Corporation Name) (Document #)

- Walk in
- Mail out
- Pick up time
- Will wait
- Photocopy
- Certified Copy
- Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

FILED  
00 APR 18 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ro change  
4/27/00  
Spayne

Examiner's Initials

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT  
OR BOTH FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation is: Mid-County Medical Center, Inc.
2. The mailing address of the corporation is: 901 45th Street, West Palm Beach, FL 33407-2413, US
3. Date of incorporation/qualification: 09/03/1975 Document number: 733733
4. The name and address of the current registered agent and office:

Valerie G. Larcombe  
1309 North Flagler Drive  
West Palm Beach, FL 33401

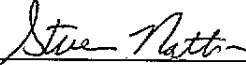
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Valerie G. Larcombe, Esq.  
Akerman Senterfitt  
Phillips Point - East Tower  
777 South Flagler Drive, Suite 900  
West Palm Beach, FL 33401-6125

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TALLAHASSEE, FLORIDA

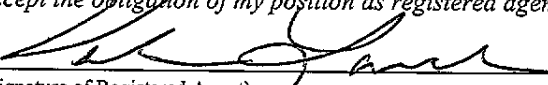
The street address of its registered office and the street address of the business office of its registered agent changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

  
\_\_\_\_\_  
Steven Nathan, President and CEO

4/11/00  
\_\_\_\_\_  
(Date)

*Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.*

  
\_\_\_\_\_  
(Signature of Registered Agent)

4/14/2000  
\_\_\_\_\_  
(Date)

If signing on behalf of an entity: Valerie G. Larcombe, Secretary

\*\*\*FILING FEE: \$35.00\*\*\*

Division of Corporation

P.O. Box 6327

Tallahassee, FL 32314