**Corporation Name(s) & Document Number(s), (if known):**

1. (Corporation Name) (Document #)
2. (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

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

**New Filings**

<table>
<thead>
<tr>
<th>Profit</th>
<th>NonProfit</th>
<th>Limited Liability</th>
<th>Domestication</th>
<th>Other</th>
</tr>
</thead>
</table>

**Amendments**

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

**Other Filings**

<table>
<thead>
<tr>
<th>Annual Report</th>
<th>Fictitious Name</th>
<th>Name Reservation</th>
</tr>
</thead>
</table>

**Registration/Qualification**

<table>
<thead>
<tr>
<th>Foreign</th>
<th>Limited Partnership</th>
<th>Reinstatement</th>
<th>Trademark</th>
<th>Other</th>
</tr>
</thead>
</table>

Examiner's Initials |
Florida Department of State, Sandra B. Mortham, Secretary of State

*** FILING FEE: $35.00 ***

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: Florida Health Sciences Center Inc.

2. The mailing address of the corporation is: Davis Island, Tampa, FL 33606

3. Date of incorporation/qualification: 7/9/97 Document number: N97080039

4. The name and address of the current registered agent and office:
   - Mike Brown
   - CT Corporation System
   - 1200 South Pine Island Road
   - Plantation, FL 33324
   - Allen, Dell, Fried & Trinkle, P.A.
   - The Barnett Plaza, Ste 1240
   - Tampa, FL 33601

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
   - Paula Bradlee, RN, CHRM
   - Tampa General Healthcare
   - Davis Island, Tampa, FL 33606

The street address of its registered office and the street address of the business office of its registered agent, as 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.

(Signature of an officer, chairman or vice chairman of the board) 10/17/97

Bruce Siegel M.D., President and CEO 10/17/97
(Printed or typed name and title) (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) 10/19/97

If signing on behalf of an entity:

Paula Bradlee RN, CHRM 10/19/97
(Printed or Printed Name) (Date)

Director, Risk Management (Capacity)

CR2E045/3/96