

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2004 8:00 A.M.
Secretary of State

DOCUMENT # P01000035384 1. Entity Name TENET ST. MARY'S, INC.					
Principal Place of Business 3820 STATE ST. SANTA BARBARA, CA 93105			Mailing Address 3820 STATE ST. SANTA BARBARA, CA 93105		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 75-2932830	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS ☒ Delete SILVER, RICHARD B 3820 STATE ST. SANTA BARBARA, CA 93105		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/Secretary ☐ Change ☒ Addition Caitlin M. Larsen 3820 State Street Santa Barbara, CA 93105	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ☐ Delete HIXON, LAWRENCE G 3820 STATE STREET SANTA BARBARA, CA 93105		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 000029822880 03/03/04--01062--001 **17636.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ☐ Delete MARMERSTEIN, PETER A 901 45TH STREET WEST PALM BEACH, FL 33407		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ☐ Delete DENT, DENNIS L 3820 STATE STREET SANTA BARBARA, CA 93105		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ☒ Delete LARSEN, CAITLIN M 3280 STATE STREET SANTA BARBARA, CA 93105		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition Asst. Secretary Kristina A. Mack 3820 State Street Santa Barbara, CA 93105	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Kristina A. Mack Kristina A. Mack, Asst. Secretary 2/20/04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					