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CR2E031(1/95)

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, is the State of Florida.
1. The name of the corporation is: Suncoast Health Care, Inc.
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: Suncoast Health Care, Inc. 2. The mailing address of the corporation is: 16330 Gulf Blvd., No. 303, Redington
Beach, Florida 33708
3. Date of incorporation/qualification: 10/10/84 Document number: 124854
4. The name and address of the current registered agent and office:
J. Marshall Fry
1051 Nokomis St.
Clearwater, FL 34615 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Gerald Heideman
16330 Gulf Blvd., No.303
Redington Beach, FL33708
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.
Lend Herdeman (Signature of an officer, chairman or vice chairman of the board) Aug 26 1997 Date)
Gerald Heideman. President (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.
X Sould Heideman Aug 26 1997 (Signature of Registered Agent)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

CR2E045(3/96)