2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H64825

Entity Name: AMISUB (NORTH RIDGE HOSPITAL,) INC.

FILED Mar 09, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Finicipal Flace of Business.	New Fillicipal Flace Of Busiliess

13737 NOEL ROAD STE 100

DALLAS, TX 75240 US

Current Mailing Address: New Mailing Address:

13737 NOEL ROAD STE. 100 ATTN: DONNA JARRELL DALLAS, TX 75240 13737 NOEL ROAD STE. 100 ATTN: DONNA JARRELL DALLAS, TX 75240 US

FEI Number: 95-3982366 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete

Name: LARSEN, CAITLIN M Address: 13737 NOEL ROAD STE. 100

City-St-Zip: DALLAS, TX 75240 US

Title: AS () Delete Name: MACK, KRISTINA A

Address: 13737 NOEL ROAD STE. 100

City-St-Zip: DALLAS, TX 75240 US

Title: T () Delete
Name: SHERMAN, JEFFREY S

Address: 13737 NOEL ROAD STE. 100

City-St-Zip: DALLAS, TX 75240 US

Title: P () Delete Name: ALEMAN, DIANNE

Address: 5757 N. DIXIE HWY.

City-St-Zip: FT. LAUDERDALE, FL 33334 US

Title: S (X) Change () Addition

Name: KRISTINA,

Address: 13737 NOEL RD STE 100

City-St-Zip: DALLAS, TX 75240 US

Name: JEFFREY,

Address: 13737 NOEL RD STE 100 City-St-Zip: DALLAS, TX 75240 US

Title: P (X) Change () Addition

 Name:
 POWERS, MARSHA

 Address:
 13737 NOEL RD STE 100

 City-St-Zip:
 DALLAS, TX 75240 US

Title: D (X) Change () Addition

Name: MACK, KRISTINA A
Address: 13737 NOEL RD STE 100
City-St-Zip: DALLAS, TX 75240 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTINA A MACK S 03/09/2009