

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 22 1996 8:00 am
Secretary of State

DOCUMENT # 373650 (1)
1. Corporation Name
PALM BEACH GARDENS COMMUNITY HOSPITAL, INC.



Principal Place of Business: **C/O MARCIA GLICK, 14001 DALLAS PKWY. S200, DALLAS TX 75240, US**
Mailing Address: **C/O MARCIA GLICK, 14001 DALLAS PKWY. S200, DALLAS TX 75240, US**

3. Date Incorporated or Qualified: **12/04/1970**
3a. Date of Last Report: **04/12/1995**

2. Principal Place of Business: **21 3360 Burns Rd, 22 Suite, Apt #, etc., 23 Palm Beach Gardens, FL, 24 33410, 25 USA**
2a. Mailing Address: **26 3820 State Street, 27 Suite, Apt #, etc., 28 Santa Barbara, CA, 29 93105, 30 USA**

4. FEI Number: **59-1223933**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **C T CORPORATION SYSTEM, 1200 SOUTH PINE ISLAND ROAD, PLANTATION FL 33324**

10. Name and Address of New Registered Agent: **81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83 000001872580, 84 City, 85 Zip Code: 06/24/96-01021-044, ***225.00, FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (Signature type for previous name of registered agent and title, if applicable) (P.O. Box Registered Agent signature required when necessary) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	EVP
NAME	SMITH, W. RANDOLPH	1.2 NAME	
STREET ADDRESS	5757 N DIXIE	1.3 STREET ADDRESS	14001 Dallas Parkway
CITY-ST-ZIP	FT LAUDERDALE FL	1.4 CITY-ST-ZIP	Dallas, TX 75250
TITLE	TD	2.1 TITLE	P
NAME	MURDOCK, MICHAEL N	2.2 NAME	Michael H. Focht, Sr.
STREET ADDRESS	5757 N DIXIE	2.3 STREET ADDRESS	3920 State Street
CITY-ST-ZIP	FT LAUDERDALE FL	2.4 CITY-ST-ZIP	Santa Barbara, CA 93105
TITLE	P	3.1 TITLE	VP
NAME	STEIGMAN, DON	3.2 NAME	
STREET ADDRESS	5757 NORTH DIXIE	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE	AT	4.1 TITLE	
NAME	ABDUL, EDWARD W, JR	4.2 NAME	
STREET ADDRESS	5757 N DIXIE	4.3 STREET ADDRESS	14001 Dallas Parkway
CITY-ST-ZIP	FT LAUDERDALE FL	4.4 CITY-ST-ZIP	Dallas, TX 75240
TITLE	VPAS	5.1 TITLE	SVP/S/D
NAME	BARRETT, WILLIAM A	5.2 NAME	Scott M. Brown
STREET ADDRESS	5757 N DIXIE	5.3 STREET ADDRESS	3820 State Street
CITY-ST-ZIP	FT LAUDERDALE FL	5.4 CITY-ST-ZIP	Santa Barbara, CA 93105
TITLE	AS	6.1 TITLE	EVP/CFO
NAME	GLICK, MARCIA R	6.2 NAME	Trevor Fetter
STREET ADDRESS	5757 N DIXIE	6.3 STREET ADDRESS	3820 State Street
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sandra B. Mortham*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/13/96 805/563-7075

CR2E034 (3/96)

06-22-96
OK