

601799

LAW OFFICE
FINK & SWEET

149 EAST INTERNATIONAL SPEEDWAY BOULEVARD

WESLEY A. FINK
JEFFREY C. SWEET

P. O. BOX 265386
DAYTONA BEACH, FLORIDA 32126-5386

OFFICE
(904) 252-7653
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April 7, 1997

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*****35.00 *****35.00

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

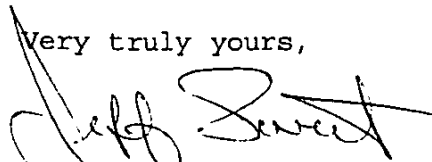
Re: Orthopaedic Clinic of Daytona Beach, P.A.

Gentlemen:

Enclosed for filing with your office please find original Statement of Change of Registered Agent incident to the captioned corporation. Our check in the amount of \$35.00 is enclosed in payment of your fee.

With kind regards, I remain,

Very truly yours,


Jeffrey C. Sweet

JCS/pke

Enclosures

Handwritten notes:
OK
601799
2000
4/9/97

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: Orthopaedic Clinic of Daytona Beach, P.A.
2. The mailing address of the corporation is: 1075 Mason Avenue, Daytona Beach, FL 32117
3. Date of incorporation/qualification: 12/31/69 Document number: 601799
4. The name and address of the current registered agent and office:

Craig M. Hankins

1075 Mason Ave.

Daytona Beach, FL 32117

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Albert Gillespy

1075 Mason Avenue

Daytona Beach, FL 32117

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.

✓ Thurman Gillespy, Jr.
(Signature of an officer, chairman or vice chairman of the board)

✓ 3-27-97
(Date)

Thurman Gillespy, Jr., M.D., President/ Director

(Printed or typed name and title)

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.

Albert W. Gillespy, M.D.
(Signature of Registered Agent)

Albert W. Gillespy, M.D.

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)