

601799

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Attorneys and Counselors at Law
A PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

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November 30, 2000

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

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

Re: Orthopaedic Clinic of Daytona Beach, P.A.
STATEMENT OF CHANGE OF REGISTERED AGENT

To Whom It May Concern:

Enclosed please find original Statement of Change of Registered Agent which we ask be filed with your office. Our firm check in the sum of \$35.00 is enclose in payment of your fee.

Please call if you have any questions or require any further information.

With kind regards, I remain,

Very truly yours,



Penny K. Every
Secretary for Jeffrey C. Sweet

Enclosures

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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STATEMENT OF CHANGE OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502, 617.1508, 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 is:

Albert Gillespy
1075 Mason Avenue
Daytona Beach, FL 32117

5. The name and address of the new registered agent is:

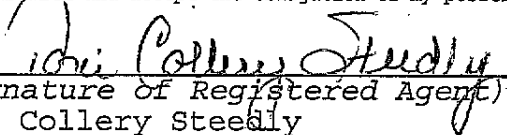
Toni Collery Steedly
Clinic Administrator
1075 Mason Avenue
Daytona Beach, FL 32117

The street address of its registered office and the street address of its registered agent will be identical.

Such change was authorized by resolution duly adopted by its board of directors and by an officer so authorized by the board.

 11-13-00
(Signature of officer) (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.

 11-13-00
(Signature of Registered Agent) (Date)
Toni Collery Steedly

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00 DEC -4 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA