2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705005

Entity Name: FLORIDA MEDICAL FOUNDATION

FILED Apr 20, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

113 E COLLEGE AVE 123 S. ADAMS ST

TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32301 US

Current Mailing Address: New Mailing Address:

PO BOX 10269

TALLAHASSEE, FL 32302 US

FEI Number: 59-1276743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MORTHAM, SANDRA B
113 E COLLEGE AVE
MORTHAM, SANDRA B
123 S. ADAMS ST

TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32301 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: SANDRA B. MORTHAM 04/20/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 MCCOY, TERENCE P MD
 Name:
 CALDWELL, JACQUES R MD

 Address:
 2412 W. PLAZA DR.
 Address:
 311 N. CLYDE MORRIS BLVD, #510

 City-St-Zip:
 TALLAHASSEE, FL 33208
 City-St-Zip:
 DAYTONA BEACH, FL 32114

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 DOLAN, JAMES B MD
 Name:
 DOLAN, JAMES B MD

 Address:
 4555 EMERSON EXPRESSWAY STE 100
 Address:
 1138 SE 5TH STREET

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 OCALA, FL 34471

Title: EVPC () Delete Title: EVPC (X) Change () Addition
Name: MORTHAM, SANDRA B

Address 443 F 00 J F0F AVF

 Address:
 113 E COLLEGE AVE.
 Address:
 123 S. ADAMS ST

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 TALLAHASSEE, FL 32301

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 BECKER, MATHIS MD
 Name:
 SMITH, ALVIN MD

 Address:
 181 S.W. 101 AVE.
 Address:
 2032 JOHN ANDERSON DRIVE

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 ORMOND BEACH, FL 32176

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA B. MORTHAM EVPC 04/20/2004