-2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 708088 ALL CHILDREN'S HOSPITAL, INC. Principal Place of Business Mailing Address

FILED May 08, 2002 8:00 am § Secretary of State 05-08-2002 90012 002 ****61.25

| SEXTON, J. DENNIS 801 SXTH ST. SOUTH SIGNATURE FILE NOW: FEE IS \$61.25 FILE NOW: FEE IS \$61.25 | | | | | |) IG FL 33701 | 801 6TH ST SO ST PETERSBUR | | SO URG FL 33701 | 801 6TH ST ST PETERSB |
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| Suite, Apt. #, etc. City & State City & St | | | | | | Iress | 3. Mailing Add | iness | Place of Busi | 2. Principal |
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| Zip Country Zip Country 59-0683252 Zip Country 5-5-0683252 S. Cartiflicate of Status Desired | | SPACE | DO NOT WRITE IN THIS S | | | #, etc. | Suite, Apt. | | | |
| SEXTON, J. DENNIS SOLUTION SEXTON, J. DENNIS SOLUTION SEXTON, J. DENNIS SOLUTION SITE PETERSBURG FL 33701 FILE NOW: FEE IS \$61.25 FILE NOW: FEE IS \$61.25 SECTION, J. DENNIS SITE ADDRESS SITE ADDRESS SITE ADDRESS SITE PETERSBURG FL 33701 SEXTON, J. DENNIS SITE PETERSBURG FL 33701 FILE NOW: FEE IS \$61.25 SITE ADDRESS SITE ADDRESS SITE PETERSBURG FL 33701 SEX TON, J. DENNIS SITE PETERSBURG FL 33701 SEX TON, J. DENNIS SITE ADDRESS SITE ADD | pplied For | Appl | 0.000050 | 4. FEI Number | | e | City & State | | ate | City & Sta |
| 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SEXTON, J. DENNIS 801 SXFH ST. SOUTH ST PETERSBURG FL 33701 City FL Zip Co 6. 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Frust Fund Contribution. Defects Address (P.O. Box Number is Not Acceptable) Added to Fees Make Check Payable Department of Stat 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE NAME SEXTON, J. DENNIS SITEMA DURINGS SITEMA DURINGS SITEMA DURINGS STEPLE ADDRESS STITEMA PART ADDRESS STEPLE ADDRESS STEPLE ADDRESS ST PETERSBURG FL 33701 THE NAME STREET ADDRESS ST PETERSBURG FL 33701 Delete TITLE NAME STREET ADDRESS ST PETERSBURG FL 33701 Delete TITLE NAME STREET ADDRESS ST PETERSBURG FL 33701 Delete TITLE NAME STREET ADDRESS ST PETERSBURG FL 33701 Delete TITLE NAME STREET ADDRESS ST PETERSBURG FL 33701 Delete TITLE NAME ST PETERSBURG FL 33701 Delete TITLE NAME STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33701 Delete TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33701 Delete TITLE NAME STREET ADDRESS ST PETERSBURG FL 33701 Delete TITLE NAME STREET ADDRESS STREE | ot Applicable | | | 59 | intry | Co | Zip | Country | | Zip |
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| SEXTON, J. DENNIS 801 SIXTH ST. SOUTH ST PETERSBURG FL 33701 City FL Zip Co City FL Zip Co City FL Zip Co City FL Zip Co 8. The above named entity submits this statement for the purpose of changing its registered discor registered agent, or both, in the state of Florida. SIGNATURE Signature, hyperid or printed name of registered agent and store 4 applicable. (NOTE: Registered Agent Signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 | | | | 7. Name and Addr | | | t Registered Agent | e and Address of Currer | 6. Name | |
| 801 SIXTH ST. SOUTH ST PETERSBURG FL 33701 Gity FL Zip Co 8. 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 SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. PARTY FUNDS PREST ADDRESS OF SEXTON, J. DENNIS STRET ADDRESS STRET ADDRE | | · · | | | Name | | | | | |
| 801 SIXTH ST. SOUTH ST PETERSBURG FL 33701 8. 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 Signature Signature, Nymed or printed name of registered agent and tile if applicable. NOTE: Registered Agent signature required when rejocating) DATE FILE NOW: FEE IS \$61.25 S. Election Campaign Financing Trust Fund Contribution. Added to Fees Make Check Payable Department of State | | N | Not Acceptable) | (P.O. Box Number is N | Street Address | SEXTON, J. DENNIS | | | | |
| 8. 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 Signature, typed or primad name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rehastating) DATE | , | | - " | _ | <u> </u> | | | | | |
| 8. 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 Signature Signat | | | | | | | | T PETERSBURG FL 33701 | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if application. (NOTE: Registered Agent algorithms required when reinstating) DATE | e | Zip Code | FL | | City | | | | | |
| SIGNATURE FILE NOW: FEE IS \$61.25 S. Election Campaign Financing Trust Fund Contribution. S. Additions/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | <u>' </u> | | red agent or both in t | ed office or registe | nanging its register | for the purpose of ch | y submits this statement | e named entit | 8. The abov |
| Trust Fund Contribution. Added to Fees Department of State | | | DATE | d when reinstating) | d Agent signature require | (NOTE: Registere | at and title if applicable. | or printed name of registered agei | | SIGNATURE |
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| T Largo, FL 33771 | | | 3771 | | | | | 3404 I | T | |
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| STREET ADDRESS 2811 SANDPIPER PL STREET ADDRESS | | | | | ADDRESS | | | | | |
| CLEARWATER FL 33762 CITY-ST-ZIP | | | | | | | | · · · · - · · · - | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the indicated on this report or supplemental report is true and accurate and that yet and the same legal effect as if made under oath; that I am an officer of the corporation or the receiver or trustee empowered to execute this report or supplemental report is true and accurate and that yet are the same legal effect as if made under oath; that I am an officer | (= = t! = · | futbotth = !=f: | ida Statutan I fuebar a est | ction 119 07/3\/i\ Eloria | ntion stated in Sec | gualify for the exen | this filing does not o | information supplied with | ertify that the | 12. I hereby o |

Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all oth

SIGNATURE:

4/29/02

(727)892 - 4401

ALL CHILDREN'S HOSPITAL, INC. E.I.N. 59-0683252 / 708088 2002 Uniform Business Report

ATTACHMENT

| Name and Address | Title |
|---|-----------------------|
| CT Robert Shuck 880 Carillon Parkway St. Petersburg, FL 33716 | Chairman/Trustee |
| CT Steve Raymund 5350 Tech Data Drive, A4-1 Clearwater, FL 33760 | Vice Chairman/Trustee |
| T Tom Dorety 6801 E. Hillsborough Avenue Tampa, FL 33680 | Trustee |
| T Robb Hough 100 Second Avenue South, Suite 800 St. Petersburg, FL 33701 | Trustee |
| T James A. Kinzel 7909 Second Street North St. Petersburg, FL 33702 | Trustee |
| T Darryl LeClair 450 Carillon Parkway, Suite 200 St. Petersburg, FL 33716 | Trustee |
| T Reginald Ligon, DDS 5201 Central Avenue St. Petersburg, FL 33710 | Trustee |
| T Jeffrey McClananthan, CPA 100 Second Avenue South, Ste 600 St. Petersburg, FL 33701 | Trustee |

ATTACHMENT

ALL CHILDREN'S HOSPITAL, INC. E.I.N. 59-0683252 / 708 08 8 2002 Uniform Business Report

Seminole, FL 33776

| Name and Address | Title | | | |
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| т | | | | |
| Mark Mondello | Trustee | | | |
| 1447 South Hercules Avenue | | | | |
| Clearwater, FL 33764 | | | | |
| T | | | | |
| Dave Moore | Twoster | | | |
| 7806 Tenth Avenue South | Trustee | | | |
| St. Petersburg, FL 33707 | | | | |
| Т | | | | |
| Van Sayler | T | | | |
| 880 Carillon Parkway | Trustee | | | |
| St. Petersburg, FL 33716 | | | | |
| т | • | | | |
| Craig Sher | Trustee | | | |
| 5858 Central Avenue | Trustee | | | |
| St. Petersburg, FL 33707 | | | | |
| T | | | | |
| Candy Tremmel | Tr | | | |
| 9454 Laura Anne Drive | Trustee | | | |
| | | | | |