

711535

Requester's Name

Shands Jacksonville  
655 West Eighth Street  
Jacksonville, Florida 32209

600003458496--5  
-11/09/00--01045--010  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in
- Mail out
- Pick up time
- Will wait
- Photocopy
- Certified Copy
- Certificate of Status

FILED  
 00 NOV -9 PM 12:07  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

T. LEW NOV 20 2000

Examiner's Initials

**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 Methodist Medical Center, Inc.
2. The mailing address of the corporation is

655 West 8<sup>th</sup> Street  
Jacksonville, Florida 32209

3. Date of incorporation/qualification: 09/26/1966 Document number: 711535

4. The name and address of the current registered agent and office:

Smith, Hulsey & Busey  
225 Water Street, Suite 1800  
Jacksonville, FL 32202


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

Charles Caniff, Jr.  
655 West 8<sup>th</sup> Street  
Jacksonville, FL 32209

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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.



Signature of an officer, chairman, or vice chairman of the board

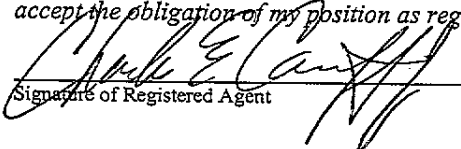
Date

11/3/00

Robert G. Norton - President

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.*



Signature of Registered Agent

Date

10/31/00

If signing on behalf of an entity:

Charles E. Caniff

Typed or printed name

Secretary

Capacity

\*\*\*FILING FEE: \$35.00\*\*\*