

740945



ACCOUNT NO. : 072100000032  
REFERENCE : 124519 4334907  
AUTHORIZATION : Patricia Pizito  
COST LIMIT : \$ 35.00

FILED  
01 APR 23 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : April 23, 2001

ORDER TIME : 1:25 PM

ORDER NO. : 124519

CUSTOMER NO: 4334907

CUSTOMER: Ms. Heather Burgess  
Hca The Healthcare Company  
Po Box 750  
One Park Plaza  
Nashville, TN 37203

600004044666--2

CHANGE OF AGENT

NAME: MEMORIAL HOSPITAL JACKSONVILLE  
AUXILIARY, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

CONTACT PERSON: Deborah Schroder -- EXT# 1118

EXAMINER: \_\_\_\_\_

RECEIVED  
01 APR 23 PM 1:46  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Q. COULLIBTE APR 23 2001

**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: MEMORIAL HOSPITAL JACKSONVILLE AUXILIARY, INC.

2. The mailing address of the corporation: 3625 University Boulevard, South  
Jacksonville, FL 32216

3. Date of incorporation/qualification: February 5, 1977 Document number: 740945

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

Allan T. Geiger  
1300 Gulf Life Drive, Suite 800  
Jacksonville, FL 32207

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

Corporation Service Company  
1201 Hays Street  
Tallahassee, Florida 32301

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]  
(Signature of an officer, chairman or vice chairman of the board)

4-17-01  
(Date)

H. Rex Etheredge  
(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]  
(Signature of Registered Agent)

4-23-01  
(Date)

If signing on behalf of an entity:

**BRIAN COURTNEY, ASST. V.P.**

[Signature]  
(Typed or Printed Name)

(Capacity)

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