2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# 766554

Entity Name: MARTIN MEMORIAL HEALTH SYSTEMS, INC.

Current Principal Place of Business:

301 HOSPITAL AVE
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

PO BOX 9010
STUART, FL 34995

New Mailing Address:

FEI Number: 59-2307522 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARMAN, RICHMOND M.
301 HOSPITAL AVE
STUART, FL 34994 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	BARNHORST, LARRY	
Address:	5946 CONGRESSIONAL PLACE	
City-St-Zip:	STUART, FL 34997	
Title:	TD	( ) Delete
Name:	SWIFT, GEORGE H III	
Address:	800 SE MONTEREY BLVD STE 102	
City-St-Zip:	STUART, FL 34996	
Title:	C	( ) Delete
Name:	SHANK, CALVIN R	
Address:	5182 BRANDYWINE WAY	
City-St-Zip:	STUART, FL	
Title:	D	( ) Delete
Name:	BOUGHNER, LEE	
Address:	1918 SW CRANE CREEK AVENUE	
City-St-Zip:	PALM CITY, FL 34990	
Title:	PD	( ) Delete
Name:	HARMAN, RICHMOND M.,	
Address:	301 HOSPITAL AVENUE	
City-St-Zip:	STUART, FL	
Title:	D	( ) Delete
Name:	PENDERGAST, JAMES	
Address:	1520 SW PENDARVIS COURT	
City-St-Zip:	PALM CITY, FL 34990	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	SHANK, CALVIN R	
Address:	6764 SE PACIFIC DRIVE	
City-St-Zip:	STUART, FL	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: RICHMOND M. HARMAN PD 04/30/2004
Electronic Signature of Signing Officer or Director — Date

RITTERSBACH, GEORGE MD VCD
2221 SE OCEAN BLVD. # 200
STUART, FL 34994

MIRAGLIA, VINCENT MD D
2398 SE OCEAN BLVD. SUITE A
STUART, FL 34996

MCLAIN, GEORGE MD D
421 E OSCEOLA STREET SUITE 3
STUART, FL 34994

MALDONADO, CARLOS MD D
421 E. OSCEOLA STREET
STUART, FL 34994

LEHACH, GEORGE SD
4609 WATERFORD DRIVE
STUART, FL 34997

CRIBB, REMBERT CD
1001 US 1 SUITE 206
JUPITER, FL 33477