2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#766554

FILED Apr 30, 2009 Secretary of State

Entity Name: MARTIN MEMORIAL HEALTH SYSTEMS, INC.

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

301 HOSPITAL AVE 301 HOSPITAL AVE

STUART, FL 34994 STUART, FL 34994 US

Current Mailing Address: New Mailing Address:

PO BOX 9010 PO BOX 9010

STUART, FL 34995 STUART, FL 34995 US

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

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

HARMAN, RICHMOND M. LORD, ROB

301 HOSPITAL AVE 301 HÓSPITAL AVE STUART, FL 34994 US STUART, FL 34994 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: ROB LORD 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BARNHORST, LARRY BARNHORST, LARRY Name: Name: 5946 CONGRESSIONAL PLACE Address: 5946 CONGRESSIONAL PLACE Address:

STUART, FL 34997 STUART, FL 34997 US

City-St-Zip: City-St-Zip:

Title: VCD () Delete Title: (X) Change () Addition LEHACH, GEORGE Name: LEHACH, GEORGE Name:

Address: 301 HOSPITAL AVE Address: 301 HOSPITAL AVE City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994 US

Title: () Delete Title: (X) Change () Addition RITTERSBACH, GEORGE MD RITTERSBACH, GEORGE MD Name: Name: 2221 SE OCEAN BLVD. #200 2221 SE OCEAN BLVD. #200 Address: Address:

City-St-Zip: STUART, FL 34996 City-St-Zip: STUART, FL 34996 US

Title: PD () Delete Title: PD (X) Change () Addition Name: HARMAN, RICHMOND M. Name: ROBITAILLE, MARK

301 HOSPITAL AVENUE 301 HOSPITAL AVENUE Address: Address: City-St-Zip: STUART, FL City-St-Zip: STUART, FL 34994 US

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

PENDERGAST, JAMES HORTON, MARY-JO Name: Name:

1520 SW PENDARVIS COURT 2626 SW EGRET POND CIRCLE Address: Address: PALM CITY, FL 34990 US City-St-Zip: PALM CITY, FL 34990 City-St-Zip:

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

DENNY, DWIGHT DENNY, DWIGHT Name: Name: Address: 301 HOSPITAL AVE Address: 301 HOSPITAL AVE STUART, FL 34984 City-St-Zip: STUART, FL 34984 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARK ROBITAILLE PD 04/30/2009