FILE NOW: FILING FEE IS \$61.25

NONPROFIT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Suite, Apt. #, etc.	SHRINERS' HOSPITALS FOR CRIPPLED CHILDREN Principal Place of Business 2900 Rocky Point Drive Tampa, Florida 33607 2 Principal Place of Business 2900 Rocky Point Drive Tampa, Florida 33631-3356 2 Principal Place of Business 2 Robbert Principal Place of Business 3 Robbert Principal Place Plac	21/95 Applied For Not Applicable
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9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FLORIDA 33324 64 City FL 85 Zup Code 14 Pursuant to the provisions of Sections 617,0502 and 617,1506. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Systch change was authorized by the corporation's board of directors, interduty accept the apportment as registered agent, as attractive agent, or both, in the State of Florida Systch change was authorized by the corporation's board of directors, interduty accept the apportment as registered agent. It as a familiar with and accept the obligations of Section 617,0502, florida Statutes. SIGNATURE 12 OFFICERS AND DIFFECTORS 13. ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS 13. ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 12 TITLE President Gene Bracewell 13 INSEE HOUSES 14 City ST-29 ALIAITA, Georgia 30336 14 Name 15 INSEE HOUSES 16 City ST-29 ALIAITA, Georgia 30336 15 INSEE HOUSES 16 City ST-29 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 16 Change Additions City ST-29 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 17 INSEE HOUSES 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIONS O IANGES TO OFFICERS AND DIFFECTORS IN 12. 18 ACDITIO	28 29 30	Added to Fees
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CITY-ST-ZIP Hayden Lake, Idaho 83835 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I furth certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made uncertify that I am an officer or director of the corporation or the exemption of the corporation or the exemption as required by Chapter 617, Florida Statutes; and that my name and the corporation of the corpora		
MILE Director Director DELETE DIRECTOR DIRE	CITY-ST-ZIP Millers Falls, Massachusetts 01349 54CITY-ST-ZIP 54CITY-ST-ZIP	

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR