2008 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED **DOCUMENT #836991** 1. Entity Name 2008 FEB 27 PM 12: 21 TENET HEALTHSYSTEM MEDICAL, INC. SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 13737 NOEL ROAD 13737 NOEL ROAD **STE 100 STE 100** DALLAS, TX 75240 DALLAS, TX 75240 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 01112008 Chg-P City & State City & State 4. FEI Number Applied For 95-2111054 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 10. 11. PRESIDENT U ☐¥ elete TITLE TITLE Change ☐ Addition Stephen Newman MD NAME FETTER, TREVOR NAME STREET ADDRESS STREET ADDRESS 13737 NOEL ROAD, SUITE 100 13737 Noel Rd Ste 100 CITY-ST-ZIP DALLAS, TX 75240 CITY-ST-ZIP Dallas TX 75240 DS [] Change TITLE ☐ Delete TITLE ☐ Addition LARSEN, CAITLIN M. NAME NAME 500119547865 STREET ADDRESS 13737 NOEL ROAD, SUITE 100 STREET ADDRESS 03/06/08 - 01014 - 005 **150.00CHTY-ST-ZIP DALLAS, TX 75240 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE SHERMAN, JEFFREY S NAME NAME STREET ADDRESS 13737 NOEL ROAD, SUITE 100 STREET AODRESS CITY-ST-ZIP DALLAS, TX 75240 CITY+ST+7IP TITLE ☐ Delete TITLE [] Change ☐ Addition MACK, KRISTINA A NAME NAME 13737 NOEL ROAD, SUITE 100 STREET ADDRESS STREET ADDRESS DALLAS, TX 75240 CITY-ST-ZIP CITY-ST-ZIP TIME ☐ Delete TITLE [] Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CÎTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Kristina A. Mack, Asst. Sec

469-893-2701

Daytime Phone #