PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Saudra B. Mortham

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

845117

(1)

BROOKWOOD HEALTH SERVICES, INC.

APPROVED AND FILED

96 JAN 29 PM 3: 18

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Suite, Apt. #, etc. City 8 State Added to Fees Country Country Country Country A This corporation has liability for intangible tax under s 199.032,	Principal Place	of Business	Mailing Address				
US 2, Pinners Have of Business 2, Pinners Have of Business 3, Pinners Have of Business 4, Pinners Have of Business 4, Pinners Have of Business 5, Confidence of Status Desired Billion 6, Business 6, Confidence of Status Desired Billion 7, Pinners Have Billion 7, Pinners Billion 7, Pinne	SUITE 200		SUITE 200				
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Sale April 6 Cory S. State	2. Prinopal Pla	ace of Business	2a. Mailing Address				
Copy State	21		· · • · · · · · · · · · · · · · · · · ·			63-0574010 Not Applicable	le
28	Suite, Apt. # 22	t, etc.	F1			1 b. Cermicate di Status Desfred I I	
26	Orty & State						
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Proximit to the provisions of Sections 607,0500 and 607,1506, Rockil Shakes, the above named depondent extraits, this statement for the purpose of changing as registered agent, or both, in the State of Florids South change was published by the corporation scharols, this statement for the purpose of changing as registered agent, if an except the deligations of, Socion 607,0505, Terrisk Shakes, the above named depondent extraits, this statement for the purpose of changing as registered agent, if an except the deligations of, Socion 607,0505, Terrisk Shakes, the above named depondent extraits, this statement for the purpose of changing as registered agent, if an except the deligations of, Socion 607,0505, Terrisk Shakes, the above named depondent extraits, this statement for the purpose of changing as registered office for a complete statement of the purpose of changing as registered office for a complete statement of the purpose of changing as registered office for a complete statement of the purpose of changing as registered office for a complete statement of the purpose of changing as registered of the complete of the purpose of changing as registered of the complete of the purpose of changing as registered of the complete of the purpose of changing as registered of the complete of the purpose of changing as registered of the complete of the purpose of changing as registered agent, then the purpose of changing a	Zφ	Country	Zip	Countr	/	8. This corporation has liability for intangible tax under s. 199.032,	
11. Fursament to the provisions of Sections 627,0502 and 607,1506, Rordal Statutes, the above named corporation submits the statement for the purpose of changing is registered office or applicated agent, or both, in the State of Rords, Such change was settlement by the corporation's breath statement for the purpose of changing is registered office or applicated agent, or both, in the State of Rords, Such change was settlement by the corporation's breath statement for the purpose of changing is registered office or applicated to the purpose of changing is registered office or applicated to the purpose of changing is registered office or application with an except the obligations of Sections (37,0505, Rordal Statutes, the above named corporation's breath the purpose of changing is registered office or application with an except the obligation of Sections (37,0505, Rordal Statutes, the above named corporation's breath for the purpose of changing is registered office or application with an except the obligation of Sections (37,0505, Rordal Statutes, the above named corporation's breath for the purpose of changing is registered office. 11. Fursament to the provisions of Section 627,0502 and 607,1506, Rordal Statutes, the above named corporation's breath for the purpose of changing is registered office. 12.	24	. 11		30			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 88		9. Name and Address of Curren	nt Registered Agent		1		
1200 SOUTH PINE ISLAND ROAD 83				81	Name	me	
PLANTATION FL 33324				82	Street	et Address (P.O. Box Number is Not Acceptable)	
1. Present to the provisions of Sections CO7 0502 and D07 1508, Florida Statutes, the above named corporation submits, this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida, Such change was auditorized by the corporation's branch, and accept the obligations of, Section CO7 0505, Florida Statutes SCONATIONE Cycling to public the depth of the purpose of change was auditorized by the corporation's branch of depth of the purpose of changing its registered agent. I am for the purpose of changin				83	1		
Critical agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as régistèred agent. Fam finither with, and accept the obligations of, Section 167, OSOS, Tronds Statutes. SIGNATURE	•			84	City	85 Zip Code	
Critical agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as régistèred agent. Fam finither with, and accept the obligations of, Section 167, OSOS, Tronds Statutes. SIGNATURE	44 Dus mod to	Huge Covers	hard 007 1500 Fladd 044		<u> </u>	PL	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DSVP	or registere familiar with SIGNATURE	ed agent, or both, in the State of Flori h, and accept the obligations of, Sect	da. Such change was authorize ion 607.0505, Florida Statutes.	ed by the con	poration's	n's bioard of directors. I hereby accept the appointment as régistered agent. Fam	
DSVP					nt signature r		
NAME BROWN, SCOTT M. 12 NAME 13 STRELLADORLSS 2700 COLORADO AVE. 13 STRELLADORLSS SANTA MONICA CA 14 CITY. SL-74P Change Addition							
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			STE. 200				,
14. Lob hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, Florida			with this films is ushed as the form			guel fu for the exemption stated in Section 410 07/00/d. Floride District	

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 under 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 under certify that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/96

(310)998-8427

Daytima Ptione #

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