2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 845271

1. Entity Name
LIFEMARK HOSPITALS, INC.

FILED
07 APR -3 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
13737 NOEL RD STE 100 DALLAS, TX 75240 US	13737 NOEL RD STE 100 DALLAS, TX 75240 US

01122007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 74-1892982 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JENNINGS, REYNOLD J 13737 NOEL RD, SUITE 100 DALLAS, TX 75240	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 200096379912 04/11/07--01003--012 **150.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LARSEN, CAITLIN M 13737 NOEL RD, SUITE 100 DALLAS, TX 75240	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SHERMAN, JEFFREY S 13737 NOEL RD, SUITE 100 DALLAS, TX 75240	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS MACK, KRISTINA A 13737 NOEL RD, SUITE 100 DALLAS, TX 75240	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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 sha[illegible] of the corporation [illegible] if changed, or on a[illegible]

SIGNATURE Kristina A. Mack

Kristina A. Mack, Asst. Sec. 3/28/07 -
Phone 469-893-2701