## FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

Abulty Address  Frienda CRice Address  Frienda CRice Address  Frienda CRice Address  S. Date Promed of Registered  11/14/1990  3. Date Promed of Registered  3. Da	WILL BE SUBJECT TO REVO	OCATION AND \$500 PENAL	IY FEE			
A09619	ANNUAL REPORT	Sandra B. Secretary	Mortham of State	98 DEC 23 F	214 -	
Adultry Actions  **MART IX TUBBE  **MART BARRARA CA 93105  **SALTS STREET  **300 STATE STREET  **500,000,000  **51, Again, pas of Last Report  **10,006/1997  **4. State of Country of Formation  **52, Martines and Address of Country  **53, Martines and Address of Country  **54, Again, Ag	1. Name of Limited Partnership				SECRETARY OF STATE	
**************************************	\$103 WEBB ROAD, LTD.					
SERIOR IN LINEAR SECULTARIES SHEET S	Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as	
Sade Sink B sinters  Sade Sink	% MARY H. YUMIBE	% MARY H. YUMBE	% MARY H. YUMIBE		[	
2. Mailing Address  3. Suble, Apt. #, etc.  5. Suble, Apt. #, etc.  5. Suble, Apt. #, etc.  6. FEI Number  7. Carnification of Status Desired  7. Carnification of Status Desired  8. Mailia check hypitable to Dept. of Status (Des revealed bits for less information)  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent  10. If changed,	3820 STATE STREET				1	
2. Apriled Address  Suite, Apt. 8, etc.  Suite, Apt. 8, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Applied For Not	SANTA BARBARA CA 93105	Santa Barbara Ca 93105	SANIA BAHBAHA CA 93105		5b. Amount of Capital Contributions in FLORIDA	
City & State  City & State  City & State  City & State  T4-2205 125  To Country  Respective of State Share of Country  Respective of State (Shore reverse sites for fee information)  9. Name and Address of Current Registered Agent  T0. If chariged, new Registered Agent Office  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL S33244  Sine. Apt. 8, sec.  City  Techniqued, new Registered Agent Office  Sine. Apt. 8, sec.  City  Techniqued, new Registered Agent Office  Sine. Apt. 8, sec.  City  Techniqued, new Registered Agent Office  Name Sine. Apt. 8, sec.  City  Techniqued, new Registered Agent Office  Name Sine. Apt. 8, sec.  City  Techniqued, new Registered State (Shore reverse sites for fee information)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11. Name(s) of General Partner(s)  11. Address of Country  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11. Address of Country  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11. Address of Country  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11. Address of Country  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11. Address of Country  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  12. Ide bereby corify that the information supplied with this filling is voluntarily furnished and does not qualify for the country that the information supplied to denied enumery from	2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		to date:	
To Country  To Cou	Suite, Apt. #, etc.			1		
8. Name and Address of Current Registered Agent  10. If changed, now Registered Agent/Office  C T CORPORATION SYSTEM  1209 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  Sume, Act 8, etc.  City  City  City  City  City  The provision of sections 201.055 and 650.152. Portice Statutes, the above-named limited permerable organizated or registered under the have of the State of Facts, authorits this statement for the proposed of seeding is registered office or registered upon, or both, in the State of Finds Such change was authorited by its general partner(s). I hursely accept the adjustors of section 520.152. Portice Statutes. Finds States Finds Such change was authorited by its general partner(s) interest the appointment of registered upon the children's proposed of section 520.152. Portice States Finds States Finds Such change was authorited by its general partner(s). I hursely accept the appointment of registered upon the section 180.0152. Portice States Finds Fi	City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  Suite, Apt. 8. etc.  CIV  FL  Zip Code  10a. Pursuant to the provisions of sections \$20.1051 and \$20.192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, such change was authorized by its general partner(s). I hareby accept the appointment of registered agent, I am familiar with, and accept the obligations of section \$20.192. Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner  11a. (Do NOT Use Foot Office Box Number)  LIFEMARK HOSPITALS, INC.  6001 WEBB ROAD  TAMPA FL  845271  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.  12. 1do 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 reflease the Division of Corporations from any libridity of non-compliance with Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I refl	Zip Country	Zip	Country	8. Make check payable to: Dept. of		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  Suite, Apt. 8. etc.  CIV  FL  Zip Code  10a. Pursuant to the provisions of sections \$20.1051 and \$20.192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, such change was authorized by its general partner(s). I hareby accept the appointment of registered agent, I am familiar with, and accept the obligations of section \$20.192. Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner  11a. (Do NOT Use Foot Office Box Number)  LIFEMARK HOSPITALS, INC.  6001 WEBB ROAD  TAMPA FL  845271  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.  12. 1do 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 reflease the Division of Corporations from any libridity of non-compliance with Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I reflease the Division of Use Section 119.07(3(k), Florida Statutes. I refl			<del></del>			
10a. Pursuant to the provisions of sections \$20.105 and \$20.105 an	9, Name and Address of Curren	it Registered Agent	Name	10. If changed, new Registerer	d Agent/Office	
PLANTATION FL 33324  Suite, Apt. 5, etc.  City  FL  Zip Code  The pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statument for the purpose of changing its registered accept the objection of sections 620.1052, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, Such change was authorized by its general partner(5). I hereby accept the separtiment of registered spent, a florida and partnership organized or registered partner(6). I hereby accept the separtiment of registered spent, a florida and partnership organized or registered partner(6). I hereby accept the separtiment of registered Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(a) of General Partner(s)  12. Name(a) of General Partner(s)  13. Name(a) of General Partner(s)  14. Name(a) of General Partner(s)  15. Name(a) of General Partner(s)  16. Name(a) of General Partner(s)  17. Name(a) of General Partner(s)  18. Name(a) of General Partner(s)  19. Name(a) of General Partner(s)  19. Name(a) of General Partner(	Street Address (F		Street Address (P.O	O. Box Number is Not Acceptable)		
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10a. Pursuant to the provisions of sections 520.1051 and 620.192, Florida Statutes, the above-named limited permership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by its general pertiner(s). I hereby accept the appointment of registered agent, as manufacture with, and accept the obligations of section 520.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (a) Address of Each General Partner (b) Not Use Post Office Box Numbers)  11b. City, State & Zip Code  11c. Registration/ Document Number  11b. City, State & Zip Code  11c. Registration/ Document Number  11d. 845271  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.  12. 1do hereby certify that the information supplied with this filing is voluntarity furnished and does not qualify for the exemption stated in Section 119.07(3)(N), Florida Statutes. I release the Division of Corporations form any liability of non-compliance with Section 119.07(3)(N) in the event that the information supplied is deemed exempt from public access. I further contrify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620. Florida Statutes.  SIGNATURE  Lifemark Hospitals, Chic., General Partner  By Call III M. Larsen, Asst. Secretary  805/563-7075						
to the purpose of changing its registered diffee or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section (20.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (D. Address of Each General Partner)  LIFEMARK HOSPITALS, INC.  6001 WEBB ROAD  TAMPA FL  845271  845271  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.  12. I do hereby certify that the information supptied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exemption from public access. I further certify that it was annual report is true and accurate and that my signature shall have the same legal effects as if made under cert. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 50.3 Florida Statutes.  SIGNATURE  Lifemark Hospitals, Jocc., General Partner  DATE  12/8/98  Caltili M. Larsen, Asst. Secretary  DATE  12/8/98			<u> </u>		<u>FL</u>	
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MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(a) of General Partner(s)  11a. (Do NOT Use Post Office Box Numbers)  11b. City, State & Zip Code  11c. Registration/Document Number  11b. City, State & Zip Code  11c. Registration/Document Number  11c. Registration/Document Number  11d. City, State & Zip Code  11d. Registration/Document Number  12d. TAMPA FL  13d. (Do NOT Use Post Office Box Numbers)  13d. TAMPA FL  14d. Registration/Document Number  14d. Registration/Document Number  15d. Regi		IS A CORPORATION	IMITED DAE			
11. Name(s) of General Partner(s)  111a. (Do NOT Use Post Office Box Numbers)  111b. City, State 8.2p Code  111c. Document Number  111b. City, State 8.2p Code  111c. Document Number  111c. City, State 8.2p Code  111c. Document Number  111c. TAMPA FL  845271  845271  845271  845271  Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.  111c. Document Number  111c. City, State 8.2p Code  111c. City, State 1.2p Code  111c. City, State 1.2p Code  111c. City, State 2.2p Code  111c. City, State 1.2p Code  1	A GENERAL PARTNER THAT	T BE REGISTERED AN	ID ACTIVE W	ITH THIS OFFICE.	R BUSINESS ENTITY	
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3 NU1/303~(U/3			Partner	DATE	12/8/98	
	Caitlin M. Typed or Printed Name of General Partner Signing Form	Larsen, Asst. Secr		Daytime Telephone Number	305/563~7075	