

A94000000549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

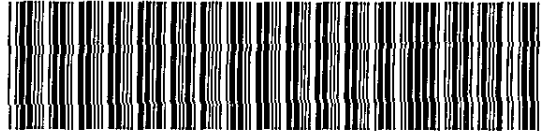
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05 JUN -7 AM 10:05  
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TALLAHASSEE, FLORIDA

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DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 405826 5042714  
AUTHORIZATION : *Patricia Pizeto*  
COST LIMIT : \$ 35.00

FILED  
05 JUN - 7 AM 10:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : June 2, 2005

ORDER TIME : 9:32 AM

ORDER NO. : 405826-005

CUSTOMER NO: 5042714

CUSTOMER: Ms. Robin Payton  
Healthcare Realty Trust  
Suite 700  
3310 West End Avenue  
Nashville, TN 37203

CHANGE OF AGENT

NAME: PASADENA MEDICAL PLAZA SSJ,  
LTD.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: \_\_\_\_\_

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED  
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

FILED  
09 JUN -7 AM 10:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. PASADENA MEDICAL PLAZA SSJ, LTD.

Name of the limited partnership

2. April 20, 1994

Date of filing/registration in Florida

3. A94000000549

Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System  
Name

1200 South Pine Island Road  
Address

Plantation, FL 33324  
City, State and Zip

5. The name and address of the new registered agent and/or office:

Corporation Service Company  
Name

1201 Hays Street  
Florida street address (P.O. Box **not** acceptable)

Tallahassee FL 32301  
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

HR of San Antonio, Inc., general partner

By: John M. Bryant, Jr.

Signature of General Partner John M. Bryant, Jr. - SVP and General Counsel

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.*

Corporation Service Company

Michelle R. Vannoy

Signature of Registered Agent Michelle R. Vannoy, Asst. Vice President

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00**