

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F36936

FILED
Jan 03, 2012
Secretary of State

Entity Name: HEALTHCARE PROPERTIES OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

1999 OLD MOULTRIE RD.
SAINT AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

210 25TH AVE. N.
SUITE 508
NASHVILLE, TN 37203

New Mailing Address:

FEI Number: 62-1166841 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD
Name: MCLAREN, DAN L
Address: 210 25TH AVE. N., SUITE 508
City-St-Zip: NASHVILLE, TN 37203

Title: S
Name: EZELL, KENNETH P JR
Address: 211 COMMERCE STREET, SUITE 800
City-St-Zip: NASHVILLE, TN 37201

Title: VP
Name: THOMAS, JAMES E
Address: 210 25TH AVE. N. SUITE 508
City-St-Zip: NASHVILLE, TN 37203

Title: VP
Name: HIRSCHMAN, KEELY M
Address: 210 25TH AVE. N. SUITE 508
City-St-Zip: NASHVILLE, TN 37203

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAMES ERIC THOMAS

VP

01/03/2012

Electronic Signature of Signing Officer or Director

Date