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February 14, 2000 F 95000001444

Integrated Health Services at Big Sail, Inc.

Secretary of State of Florida Division of Corporations 409 East Gaines Street Tallahassee, FL 32399 300003135873--9 -02/15/00--01082--011 *****35.00 ******35.00

Attention:

RE:

Corporate Filing Clerk

Kindly file the duplicated Statement of Change of Agent Form for the attached referenced corporation, returning a filed stamped copy to us in the self-addressed, stamped envelope provided for your convenience ASAP.

We are enclosing a check for \$35.00 payable to you for this filing.

Please contact the undersigned at (800) 221-0102, if there are any problems or questions before returning the filing.

Thank you for your assistance.

Sincerely,

John Morrissey

Assistant Vice President

JM:moc Enclosures 2-24-00

EB 15 AM II: 29

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT - OR BOTH FOR CORPORATIONS

corporation organized under the laws of the State of <u>DELAW</u> to change its registered office or registered agent, or both, in	VARE submits the following statement in order the State of Florida.
1. The name of the corporation is: Integrated Health Se	₫e
2. The mailing address of the corporation is: 10065 RI3. 21117	ED RUN BLVD, OWINGS MILLS, MD
4. Date of incorporation/qualification: 05/02/1995	Document number: F95000002144
5. The name and address of the current registered agent	and office:
C T Corporation Systems	
1200 S. Pine Island Road	
Plantation, FL 32324	FEB T
5. The name and address of the new registered agent and	
NATIONAL CORPORATE RE	SEARCH, LTD., INC.
1406 Hays Street, Suite #2, Talla	ahassee, FL 32301
The street address of its registered office and the street a changed, will be identical.	address of the business office of its registered agent, as
Such change was authorized by resolution duly adopted be the board.	y its board of directors or by an officer so authorized by
MEUSS2 1	2/10/02
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Melissa Warlow, Vice President	
(Printed or typed name and title)	(Date)
Having been named as registered agent and to accept service of the appointment as registered agent and agree to act in this cap statutes relative to the proper and complete performance of my position as registered agent.	acity. I further agree to comply with the provisions of all
A Kamma	2/00/00
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
John L. Morrissey	Assistant Vice President
(Typed or Printed Name)	(Capacity)
CR2E045(4/95)	Filing Fee: \$35.00

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