

F98000004402

Document Number Only

CT Corporation System

Requestor's Name
660 East Jefferson Street

Address
Tallahassee, FL 32310 222-1092

City State Zip Phone

CORPORATION(S) NAME

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*****70.00 *****70.00

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DIVISION OF CORPORATION

Hospital Real Estate Capital, Inc.

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| <input type="checkbox"/> NonProfit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC-1 Financing Statement | <input type="checkbox"/> UCC-3 Filing |
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE
STATE OF FLORIDA:

1. Hospital Real Estate Capital, Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware

(State or country under the law of which it is incorporated)

3. 62-1647870

(FEI number, if applicable)

4. April 17, 1996

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON Qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))

7. 2000 Crestwood Boulevard, Birmingham, Alabama 35210

(Current mailing address)

8. See Attachment

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324

(Zip Code)

10. Registered agent acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. 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 obligation of my position as registered agent.

C T Corporation System

Dale W. Morris

(Registered agent's signature) (Officer)

Dale W. Morris, Assistant Vice President

(Type Name and Title of Officer)

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TALLAHASSEE, FLORIDA

Hospital Real Estate Capital, Inc.

VI. Corporate Purpose

The purposes of the Company are to establish and operate a realty program to provide debt and equity capital to health care providers; to acquire, develop, arrange financing for, operate, own, lease and/or sell both real and personal property, including but not limited to medical/professional office buildings, clinics, hospitals and other related facilities; and to engage in any lawful activities for which a company may be formed under the Act.

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TALLAHASSEE, FLORIDA

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached list of directors

Address: _____

Vice Chairman: See attached list of directors

Address: _____

Director: See attached list of directors

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: See attached list of officers

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Hope A. Howe
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Hope A. Howe, Secretary
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

Hospital Real Estate Capital, Inc.

VII. Officer and/or Director Information

Officers:

William T. Ratliff, III
President
1900 Crestwood Blvd.
Birmingham, AL 35210

Lizabeth R. Nichols
Vice President
1900 Crestwood Blvd.
Birmingham, Alabama 36210

James K.V. Ratliff, Jr.
Executive Vice President
1900 Crestwood Blvd.
Birmingham, AL 35210

Michael E. Cassidy
Senior Vice President
2000 Crestwood Blvd.
Birmingham, AL 35210

Joseph S. Knight
Senior Vice President
2000 Crestwood Blvd.
Birmingham, AL 35210

John Moser
Senior Vice President
2000 Crestwood Blvd.
Birmingham, AL 35210

Suzanne H. Moore
Treasurer
1900 Crestwood Blvd.
Birmingham, AL 35210

Hope A. Howe
Secretary
1900 Crestwood Blvd.
Birmingham, AL 35210

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TALLAHASSEE, FLORIDA

Directors:

Robert M. Couch
1900 Crestwood Blvd.
Birmingham, AL 35210

William T. Ratliff, III
1900 Crestwood Blvd.
Birmingham, AL 35210

James K.V. Ratliff, Jr.
1900 Crestwood Blvd.
Birmingham, AL 35210

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TALLAHASSEE, FLORIDA

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOSPITAL REAL ESTATE CAPITAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF JULY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel
Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

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07-29-98