FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 24 1997 8:00am
Secretary of State

DOCUMENT # **H23570** **(5)**

1. Corporation Name
CHARTER HOSPITAL OF MIAMI, INC.

Principal Place of Business
1100 NW 27 ST
MIAMI FL 33172
US

Mailing Address
577 MULBERRY ST.
P O BOX 209
MACON GA 31202-0209

3. Date Incorporated or Qualified: **10/02/1984**
3a. Date of Last Report: **02/02/1996**

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: **61-1061599** — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	COBERN, JOSEPH M.	
STREET ADDRESS	3414 PEACHREE RD NE SUITE 1400	
CITY-ST-ZIP	ATLANTA GA	
TITLE	D	☑ DELETE
NAME	MCRAE, GLENN A	
STREET ADDRESS	577 MULBERRY ST.	
CITY-ST-ZIP	MACON GA	
TITLE	VD	☑ DELETE
NAME	MCCAULEY, JOHN C	
STREET ADDRESS	577 MULBERRY ST.	
CITY-ST-ZIP	MACON GA	
TITLE	P	☑ DELETE
NAME	O'SHAUGHNESSY, JON C	
STREET ADDRESS	3414 PEACHTREE RD NE, SUITE 1400	
CITY-ST-ZIP	MACON GA	
TITLE	T	☐ DELETE
NAME	SANFORD, CHARLOTTE A	
STREET ADDRESS	3414 PEACHTREE RD NE, SUITE 1400	
CITY-ST-ZIP	ATLANTA GA	
TITLE	S	☐ DELETE
NAME	FILUSH, JAMES M	
STREET ADDRESS	577 MULBERRY ST.	
CITY-ST-ZIP	MACON GA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☑ Change ☐ Addition
1.2 NAME	COBERN, JOSEPH M.	
1.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400	
1.4 CITY-ST-ZIP	Atlanta, GA 30326	
2.1 TITLE	D	☐ Change ☑ Addition
2.2 NAME	LITTLE, JOSEPH C.	
2.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400	
2.4 CITY-ST-ZIP	Atlanta, GA 30326	
3.1 TITLE	V	☐ Change ☑ Addition
3.2 NAME	Everett, Kim	
3.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400	
3.4 CITY-ST-ZIP	Atlanta, GA 30326	
4.1 TITLE	P	☐ Change ☑ Addition
4.2 NAME	JIM JOHNSON	
4.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400	
4.4 CITY-ST-ZIP	Atlanta, GA 30326	
5.1 TITLE	DT	☑ Change ☐ Addition
5.2 NAME	SANFORD, CHARLOTTE	
5.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400	
5.4 CITY-ST-ZIP	Atlanta, GA 30326	
6.1 TITLE		☑ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 1-9-97 (912) 742-1161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date
James M. Filush - Secretary