2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000002493

Entity Name: COCONUT CREEK MEDICAL CENTER, L.L.C.

FILED Mar 28, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3880 COCONUT CREEK PKWY. COCONUT CREEK, FL 33066

Current Mailing Address: New Mailing Address:

711 LINDSAY-BAKER COURT 727 LINDSAY-BAKER COURT GAINESVILLE, GA 305061553 GAINESVILLE, GA 305061553

FEI Number: 65-1077859 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TURNER, SCOTT 4301 METRIC DR. WINTER PARK, FL 32792 US

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

MANAGING MEMBERS/MEMBERS:

 Title:
 MGR
 () Delete

 Name:
 BAKER, ROCK E

 Address:
 711 LINDAY-BAKER CT.

City-St-Zip: GAINESVILLE, GA 305061553

 Title:
 MGR
 () Delete

 Name:
 BAKER, LENNY W

 Address:
 711 LINDAY-BAKER CT.

City-St-Zip: GAINESVILLE, GA 305061553

ADDITIONS/CHANGES:

itle: MGR (X) Change () Addition

 Name:
 BAKER, ROCK E

 Address:
 727 LINDAY-BAKER CT.

 City-St-Zip:
 GAINESVILLE, GA 305061553

Title: MGR (X) Change () Addition

Name: BAKER, LENNY W Address: 3203 CLUB POINT

City-St-Zip: GAINESVILLE, GA 305061553

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROCK E BAKER MGR 03/28/2002