## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M9800000093  1. Entity Name BROOKWOOD MIAMI SERVICE CENTER CO., L.L.C.  Principal Place of Business Mailing Address 55 TOZER ROAD 55 TOZER ROAD						FILED			
					(	00 APR 10 AH 9: 20			
					SECRETARY OF STATE TALLAHASSEE, FLORIDA				
BEVERLY MA	01915	BEVERLY MA 01915-5515					dig 88(2) 88(1) 882(8)	M(8.8 (J.H. 38.8)	
		0.11-22							
2. Principal P	3. Mailing Address								
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE				
City & Stat	θ	City & State	City & State			04-3405242		plied For t Applicable	
Zip Country		Zip	Zip Country		Certificate of Status Desired				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
CORPORATION SERVICE COMPANY				Name					
1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32301-2525				70 Code					
8. The above named entity submits this statement for the purpose of changing its regis				City FL Zip Code					
		Make Check Pa	ayable t	FEE IS \$50.0 o Department			000		
9. TITLE	MANAGING MEM	BERS/MEMBERS	10. TITL			ADDITIONS/CHANG	GES Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	TRKLA, THOMAS N 55 TOZER ROAD BEVERLY MA 01915	( Descrip	NAM Stri						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BROWN, THOMAS M 55 TOZER ROAD BEVERLY MA 01915  MGRM MAEL, JOEL A 1370 AVE. OF THE AMERICAS, SUITE 2001				Change Change Addition 100003222019 -04/25/0001014024 *****50.00 *****50.00				
TITLE WAME STREET ADDRESS CITY-81-21P							☐ Change	Addition	
TITI F MAME STREET ADDRESS CITY- ST- ZIP		□ Delete					☐ Change	Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					Change	Addition	
TITLE NAME STREET AUDRESS		Deleto		ET ADDRESS		. ام	Change	Addition	
CITY-ST-ZIP  11. Lihereby o	certify that the information supplied wi	ith this filing does not qualify to		- ST-ZIF motion stated in	Section 119.07(3)(i) FI	orida Statutes. I further	certify that the in	formation	
indicated	on this report is true and accurate an bility company or the receiver or trust	nd that my signature shall have	the same	e legai effect as i	if made under oath; tha	it I am a managing me	mber or manage	r of the	

4-5-02 Date

Daytime Phone #