
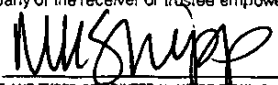


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90043 046 ****50.00

DOCUMENT # M99000000716					
1. Entity Name LHSC, LLC					
Principal Place of Business 103 POWELL COURT, SUITE 200 BRENTWOOD, TN 37027			Mailing Address 103 POWELL COURT, SUITE 200 BRENTWOOD, TN 37027		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		03222005 Chg-LLC CR2E083 (10/03)	
Zip		Country		4. FEI Number 62-1778111	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when remaining) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LIFEPOINT HOLDINGS 2, LLC 103 POWELL COURT, SUITE 200 BRENTWOOD, TN 37027	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP CULOTTA, MICHAEL J 103 POWELL CT., STE. 200 BRENTWOOD, TN 37027	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHIPPEY, MARY KIM E 103 POWELL CT., STE. 200 BRENTWOOD, TN 37027	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CARPENTER, WILLIAM ONE PARK PLAZA NASHVILLE, TN 37203	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPC WILLIS, GARY D 103 POWELL COURT, SUITE 200 BRENTWOOD, TN 37027	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS CARPENTER, WILLIAM F III 103 POWELL COURT, SUITE 200 BRENTWOOD, TN 37027	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Shipp, Mary Kim E.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. I 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 report is true and accurate and that my 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: 			04/06/05 615.372.8500		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

ATTACHMENT 40062905
#M99 000000 716

LHSC, LLC
103 Powell Court, Suite 200
Brentwood, Tennessee 37027
(615) 372-8500
FEIN: 62-1778111

Additional Managers:

NAME	TITLE
William M. Gracey	Chief Operations Officer
Kelvin M. Ault	Vice President

Mailing Address for all Managers:

103 Powell Court, Suite 200
Brentwood, TN 37027