

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000010764

FILED
Aug 31, 2009
Secretary of State

Entity Name: FLORIDA HOSPITAL FLAGLER MEDICAL OFFICES ASSOCIATION, INC.

Current Principal Place of Business:

875 STERTHAUS AVE.
ORMOND BCH, FL 32174

New Principal Place of Business:

60 MEMORIAL MEDICAL PARKWAY
PALM COAST, FL 32164

Current Mailing Address:

875 STERTHAUS AVE.
ORMOND BCH, FL 32174

New Mailing Address:

60 MEMORIAL MEDICAL PARKWAY
PALM COAST, FL 32164

FEI Number: 26-2158309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMAS, DEBORAH H
875 STERTHAUS AVE.
ORMOND BCH, FL 32174 US

Name and Address of New Registered Agent:

ZIESMER, VALERIE J
60 MEMORIAL MEDICAL PARKWAY
PALM COAST, FL 32164 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: VALERIE J. ZIESMER

08/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GENTRY, MICHAEL V
Address: 875 STERTHAUS AVE.
City-St-Zip: ORMOND BCH, FL 32174

Title: STD () Delete
Name: THOMAS, DEBORA H
Address: 875 STERTHAUS AVE.
City-St-Zip: ORMOND BCH, FL 32174

Title: VD () Delete
Name: OTTATI, DAVID
Address: 875 STERTHAUS AVE.
City-St-Zip: ORMOND BCH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OTTATI, DAVID A
Address: 60 MEMORIAL MEDICAL PARKWAY
City-St-Zip: PALM COAST, FL 32164

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change () Addition
Name: ZIESMER, VALERIE J
Address: 60 MEMORIAL MEDICAL PARKWAY
City-St-Zip: PALM COAST, FL 32164

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VALERIE J. ZIESMER

CFO

08/31/2009

Electronic Signature of Signing Officer or Director

Date