2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07186

Entity Name: SUN COAST HEALTH SYSTEM, INC.

FILED Jun 03, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

2025 INDIAN ROCKS RD. 2025 INDIAN ROCKS RD.

PO BOX 2025 PO BOX 2025 LARGO, FL 346499025 LARGO, FL 337741035 US

Current Mailing Address: New Mailing Address:

PO BOX 2025 PO BOX 2025

LARGO, FL 346499025 LARGO, FL 337799983 US

FEI Number: 59-2545650 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:

ARCHBELL, LARRY J ARCHBELL, LARRY J 2025 INDIAN ROCKS RD. 2025 INDIAŃ ROCKS RD. LARGO, FL 33774 LARGO, FL 337741035 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: 06/03/2004

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

OFFICERS AND DIRECTORS:

LARGO, FL 33774

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

LARGO, FL 337741035 US

VC (X) Change () Addition () Delete HAWKINS, T.D. ARCHBELL, LARRY J Name: Name:

11687 TRADWINDS BLVD Address: 2025 INDIAN ROCKS ROAD Address: City-St-Zip: LARGO, FL 33773 City-St-Zip: LARGO, FL 337741035 US

Title: Title: (X) Change () Addition () Delete Name: ARCHBELL, LARRY J Name: NEWHOUSE, CATHERINE Address: 2025 INDIAN ROCKS ROAD Address: 2025 INDIAN ROCKS ROAD

Title: CTR () Delete Title:

(X) Change () Addition OTTAVIANI, ANTHONY DO Name: LUSKA, BETTY V Name:

464 BLUFFVIEW DR 2025 INDIAN ROCKS ROAD Address: Address: City-St-Zip: BELLEAIR BLUFFS, FL 34640 City-St-Zip: LARGO, FL 337741035 US

() Delete Title: Title: (X) Change () Addition LOWERY, G. DAVID Name: Name: OTTAVIANI, ANTHONY N 212 HARBORVIEW 2025 INDIAN ROCKS ROAD Address: Address: City-St-Zip: LARGO, FL 33770 City-St-Zip: LARGO, FL 337741035 US

Title: (X) Delete Title: () Change () Addition

TAYLOR, J.ERIC Name: Name: 18 FERNBROOKE DRIVE Address: Address: SAFETY HARBOR, FL 34695 City-St-Zip: City-St-Zip:

Title: (X) Delete Title: () Change () Addition

SULLIVAN, CLAUDE Name: Name: Address: 14106 KENSIGTON OAK PL Address: LARGO, FL 34644 City-St-Zip: City-St-Zip:

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 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: LARRY J. ARCHBELL MR 06/03/2004