2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32088

FILED Mar 23, 2005 Secretary of State

Entity Name: RETIRED EMPLOYEES OF TALLAHASSEE MEMORIAL HEALTHCARE, INC.

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

2103 WOODSTOCK LANE TALLAHASSEE, FL 32303738 US

Current Mailing Address: New Mailing Address:

2103 WOODSTOCK LANE TALLAHASSEE, FL 32303 US

FEI Number: 59-2945895 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:

EBEL, JOHN A. 2103 WOODSTOCK LANE TALLAHASSEE, FL 32303 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:

Flateria Circular of Decideral Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:P () DeleteTitle:P (X) Change () AdditionName:MEEKS, OLIVIAName:TRICQUET, BETTY LOUAddress:1745 CAPITAL CIRCLE NEAddress:1783 FOLKSTONE ROADCity-St-Zip:TALLAHASSEE, FL 32308 USCity-St-Zip:TALLAHASSEE, FL 32312 US

Title: V () Delete Title: () Change () Addition

 Name:
 BARNES, BETTY
 Name:

 Address:
 1029 HARLEM ST.
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32304 US
 City-St-Zip:

Name: LUNAN, ENID Name: EBEL, JOHN A

 Address:
 2409 BASS BAY DR.
 Address:
 2103 WOODSTOCK LANE

 City-St-Zip:
 TALLAHASSEE, FL 32312 US
 City-St-Zip:
 TALLAHASSEE, FL 32303 US

Title: DS () Delete Title: () Change () Addition

 Name:
 NELSON, SHIRLEY
 Name:

 Address:
 1212 SPOTTSWOOD DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32308 US
 City-St-Zip:

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

Name:TRICQUET, BETTYName:SHEFFIELD, JÁMIEAddress:1783 FOLKSTONE ROADAddress:101 OSCEOLA ROADCity-St-Zip:TALLAHASSEE, FL 32308 USCity-St-Zip:PERRY, FL 32348 US

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

Name:EBEL, JOHN AName:PENNY, BLASZYZCKAddress:2103 WOODSTOCK LANEAddress:4150 DEER LANE DRIVECity-St-Zip:TALLAHASSEE, FL 32303 USCity-St-Zip:TALLAHASSEE, FL 32312 US

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: JOHN A. EBEL T 03/23/2005