

N96000001669

Buchanan Ingersoll
PROFESSIONAL CORPORATION

Attorneys

March 27, 1997

One Turnberry Place
19495 Biscayne Boulevard, Suite 606
Aventura, FL 33180-2320
Telephone: 305-933-5600
Fax: 305-933-2350

NationsBank Tower
100 S.E. Second Street, Suite 2950
Miami, Florida 33131-2150
Telephone: 305-347-4080
Fax: 305-347-4089

VIA REGULAR MAIL

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: *Helen Ellis Physician Hospital Alliance, Inc.*

200002128842--6
-03/31/97--01132--013
*****35.00 *****35.00

Dear Sir/Madam:

Enclosed is the completed Statement of Change of Registered Office, for the above captioned corporation. Also enclosed is the filing fee in the amount of \$35.00.

Please acknowledge receipt of the Statement of Change of Registered Office for Helen Ellis Physician Hospital Alliance, Inc. by stamping the enclosed copy of this letter and returning it in the self-addressed, stamped envelope provided for your convenience.

Sincerely,

Claudia L. Bass

Claudia L. Bass
Legal Assistant

clb
enclosure
cc: Jim Kennedy, Esquire

FILED
97 MAR 31 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten initials and signature

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT
OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: Helen Ellis Physician Hospital Alliance, Inc.

1b. The mailing address of the corporation is: 1395 S. Pinellas Avenue, Tarpon Springs, FL 34689-3790

1c. Date of incorporation: 03/27/96 Document number: N96000001669

2. The name and address of the current registered agent and office:

James J. Kennedy, III
101 E. Kennedy Blvd., Suite 1030
Tampa, FL 33602 US

3. The name and address of the new registered agent and office: (P.O. Box not Acceptable)

James J. Kennedy, III
Buchanan Ingersoll P.C.
Suite 2500, SunTrust Financial Centre
401 East Jackson Street
Tampa, Florida 33602

The street address of its registered office and the street address of the business office of the registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by the board of directors or by an officer so authorized by the board.

Joseph N. Kiefer March 06, 1997
(Signature of an officer, chairman or vice chairman of the board) (Date)

JOSEPH N. KIEFER VICE-PRESIDENT
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Joseph N. Kiefer 3/15/97
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

(Typed or printed Name) (Capacity)