

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003595

FILED
Apr 30, 2004
Secretary of State

Entity Name: INDIAN ROCKS MEDICAL CENTER, INC.

Current Principal Place of Business:

12685 ULMERTON ROAD
SUITE 4-131
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

12685 ULMERTON ROAD
SUITE 4-131
LARGO, FL 33774

New Mailing Address:

FEI Number: 59-3587767 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERGUSON, TIMOTHY A
12685 ULMERTON ROAD
SUITE 4-131
LARGO, FL 33774 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: MARTIN, STEPHANIE
Address: 11381 OAK LN.
City-St-Zip: LARGO, FL 33778

Title: DS () Delete
Name: JOHNSON, KARIN
Address: 447 22ND ST.
City-St-Zip: BELLEAIR BEACH, FL 33786

Title: D () Delete
Name: HAYNES-EVANS, MELONIE
Address: 9494 SILVERTHORN ROAD
City-St-Zip: LARGO, FL 33777

Title: D () Delete
Name: JANECKI, CHET
Address: 8496 BARDMOOR PL
City-St-Zip: LARGO, FL 33777

Title: D () Delete
Name: RICHMAN, MARC
Address: 13211 WAISINGHAM RD.
City-St-Zip: LARGO, FL 33774

Title: P () Delete
Name: FERGUSON, TIMOTHY
Address: 10392 136TH ST
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: HAYNES-EVANS, MELANIE
Address: 9494 SILVERTHORN ROAD
City-St-Zip: LARGO, FL 33777

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

Title: T (X) Change () Addition
Name: JONES, KELLY
Address: 1129 4TH AVE NW
City-St-Zip: LARGO, FL 33770

Title: () Change () Addition
Name:
Address:
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: KELLY JONES

T

04/30/2004

Electronic Signature of Signing Officer or Director

Date

MARTIN, CHARLIE TITLE - V
11381 OAK LN
LARGO, FL 33778