P02047

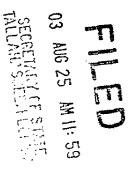
(Re	equestor's Name)			
(***	-4-5000 0 10000			
(Ac	idress)			
(
(Ac	ldress)			
•	,			
(Cil	ty/State/Zip/Phone	==#)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
		-		
		1		
		ł		
		1		
		1		
				

Office Use Only



100022525331

08/25/03--01034--019 **35.00



al. 8/29

PARANET CORPORATION SERVICES, INC.

3761 Venture Drive Suite 260 Duluth, Georgia 30096 800-277-9977 / Fax 800-815-0477

August 19, 2003

FILING TRANSMITTAL LETTER

Corporations Division
Florida Department of State
409 E. Gaines Street
Tallahassee, Florida 32399
Phone: 850-488-9000

Please file the following document on behalf of the above referenced entity:

1. Change of Agent

Please send evidence as follows:

1. Send original via First Class Mail to me in the self-addressed envelope.

Thank you for your assistance. If you have any questions, please call me using our toll free number 800-277-9977.

Paranet Job No. 03-07-0190

Very truly yours,

Stephanie Thomas

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

this statement o	of change is submitted for a corporat	517.0502, 607.1508, or 617.1508, F ion <u>org</u> anized under the laws of the S	State of		
Virginia of Florida.	in order to change its registe	ered office or registered agent, or be	oth, in the State		
1 The name of	the corporation: FHC Health System	ns, Inc.			
		I., Norfolk, VA 23502			
n FF			ALSE DO		
3. The mailing	address (if different): n/a		NET SES		
4. Date of incom	rporation/qualification: 05/15/84	Document number: P02	1047 <u>1</u>		
	artment of State:	ered agent and registered office on file	e with the		
	The Prentice Hall Corporation Syste	m <u>= </u>			
	1201 Hays Street				
	Tallahassee, FL 32301				
6. The name and street address of the new registered agent (if changed) and /or registered office (if					
changed):	NRAI Services, Inc.				
	526 E. Park Avenue	-			
	(P.O. Box or personal ma	ailbox NOT acceptable)	• •		
	Tallahassee, FL 32301				
The street addragent, as chang	ess of its registered office and the st sed will be identical.	treet address of the business office o	f its registered		
Such change wauthorized by t	as authorized by resolution duly add he board, of the corporation has bee	opted by its board of directors or by in notified in writing of the change.	an officer so		
Wintellier of an olling	r, chairman or vice chairman of the board)	Rebecca H. White, Secretary (Printed or typed name and title)			
I hereby accep I further agree performance o	t the appointment as registered ager to comply with the provisions of all f my duties, and I am familiar with a		tion as		
- SMWM	Signature of Registered Agent)	(Date)			
If signing on beha	ulf of an entity: UE THOMAS	Special Asst. Secretary			
NRAI Services	(Typed or Printed Name) Inc. ** FILING F	(Capacity) EE: \$35.00 * * *			