

**FILED**  
**May 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90078 014 \*\*\*158.75

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P04000042213</b>			
1. Entity Name <b>PROMISE HOSPITAL OF SAN ANTONIO, INC.</b>			
Principal Place of Business <b>1001 YAMATO RD STE 300 BOCA RATON, FL 33431</b>		Mailing Address <b>1001 YAMATO RD STE 300 BOCA RATON, FL 33431</b>	
2. Principal Place of Business - No P.O. Box # <b>999 Yamato Road</b>		3. Mailing Address <b>999 Yamato Road</b>	
Suite, Apt. #, etc. <b>Third Floor</b>		Suite, Apt. #, etc. <b>Third Floor</b>	
City & State <b>Boca Raton, FL</b>		City & State <b>Boca Raton, FL</b>	
Zip <b>33431</b>	Country <b>USA</b>	Zip <b>33431</b>	Country <b>USA</b>
6. Name and Address of Current Registered Agent <b>VAZQUEZ, WILLIAM M 1001 YAMATO ROAD SUITE 300 BOCA RATON, FL 33431</b>		7. Name and Address of New Registered Agent Name <b>William M. Vazquez</b> Street Address (P.O. Box Number is Not Acceptable) <b>999 Yamato Road, Third Floor</b> City <b>Boca Raton</b> <b>FL</b> Zip Code <b>33431</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <b>William M. Vazquez</b> <i>[Signature]</i> DATE <b>4-19-07</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when not filing)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MD KANTERMAN, LARRY 1001 YAMATO ROAD SUITE #300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Kanterman, Lawrence 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO BARONOFF, PETER 1001 YAMATO ROAD SUITE #300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO/D Baronoff, Peter 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KOSLOW, HOWARD 1001 YAMATO ROAD SUITE #300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	X Koslow, Howard 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD LEDER, LAWRENCE 1001 YAMATO ROAD SUITE #300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	X T/S/D Leder, Lawrence 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DAWSON, MARK 1001 YAMATO ROAD SUITE #300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	X D Dawson, Mark 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VAZQUEZ, WILLIAM M 1001 YAMATO ROAD SUITE #300 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	X D Vazquez, William M. 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like information.			
SIGNATURE: <b>William M. Vazquez</b> <i>[Signature]</i>		Date <b>4-19-07</b> Daytime Phone # <b>561-869-3000</b>	