2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 20, 2009
Secretary of State

DOCUMENT# P06000115503

Entity Name: MID- PINELLAS MEDICAL CENTER, INC.

Current Principal Place of Business:

1531 S. MISSOURI AVENUE
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3955
SEMINOLE, FL 33775

New Mailing Address:

1531 S. MISSOURI AVENUE
CLEARWATER, FL 33756

FEI Number: 06-1793324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BECLAR PROPERTIES, INC
6776 TEQUESTA DRIVE
SEMINOLE, FL 33775 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: LAUREN A REYNOLDS

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: REYNOLDS, LARRY A
Address: P.O. BOX 3955
City-St-Zip: SEMINOLE, FL 33775

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAUREN A REYNOLDS PRES 10/20/2009

Electronic Signature of Signing Officer or Director — Date