

2010 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 04, 2010
Secretary of State

Entity Name: SOUTH LAKE MEDICAL CENTER, INC.

Current Principal Place of Business:

255 CITRUS TOWER BLVD
SUITE # 206
CLERMONT, FL 34711

New Principal Place of Business:

265 CITRUS TOWER BLVD
SUITE # 206
CLERMONT, FL 34711

Current Mailing Address:

255 CITRUS TOWER BLVD
SUITE # 206
CLERMONT, FL 34711

New Mailing Address:

265 CITRUS TOWER BLVD
SUITE # 206
CLERMONT, FL 34711

FEI Number: 20-8666890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASIR, SHAZIA
255 CITRUS TOWER BLVD
SUITE # 206
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

NASIR, SHAZIA
265 CITRUS TOWER BLVD
SUITE # 206
CLERMONT, FL 34711 US

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:

01/04/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: NASIR, SHAZIA
Address: 265 CITRUS TOWER BLVD, SUITE # 206
City-St-Zip: CLERMONT, FL 34711

Title: SEC
Name: SHARIF, NASIR
Address: 265 CITRUS TOWER BLVD, SUITE # 206
City-St-Zip: CLERMONT, FL 34711

I hereby 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 all other like empowered.

SIGNATURE: NASIR SHARIF

SEC

01/04/2010

Electronic Signature of Signing Officer or Director

Date