

March 5, 2001

## <u>VIA FEDERAL EXPRESS</u>

Florida Dept. of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

PRINCIPAL LOCATIONS

PHILADELPHIA Ритѕвилен PRINCETON LONDON Мідмі BUFFALO NEW YORK CITY HARRISBURG TAMPA WASHINGTON, DC

Re: Statements of Change of Registered Office/Registered Agent

Dear Sir or Madam:

\*\*\*\*\*35.00

We have enclosed one original and one copy of Statements of Change of Registered Office or Registered Agent or Both, duly executed and dated, for the following corporations and limited partnerships:

> Intracoastal Health Corporation Intracoastal Holdings, Inc. Intracoastal Practice Services, Inc. Good Samaritan Health Corp. Good Samaritan Medical Pavilions, Inc. St. Mary's Imaging Center, Inc.

St. Mary's ASC, Inc.

St. Mary's Care Services, Inc.

Women's Health Services, Inc.

St. Mary's Ancillary Services, Inc.

The Edward and Lucille Kimmel Outpatient Surgical Center Limited Partnership PHD Investors, LTD.

Please provide me with a stamped copy of the enclosed Statements of Change by return mail. We have enclosed a self-addressed, stamped envelope for your convenience. Thank you.

> Very truly yours. Dale Welster /KH

Dale S. Webber

**Enclosures** 

PA Charge 3/12/02

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

Pursuant to the provisions of s the undersigned corporation or			, Florida Statutes,
submits the following statement	-	<u>.</u>	l agent, or both, in
the State of Florida.			
1. The name of the corporation:	Intracoastal Hold	ings, Inc.	
			,
2. The mailing address of the co	rporation: 1401 Forum	Way, Suite 101,	
West Palm Beach, Flo	rida 33401		<del></del>
3. Date of incorporation/qualifi	cation: 6/30/95	Document number:	P95000051908
4. The name and address of the	current registered agent and	d office:	
Valerie G.	Larcombe, Esq.		
Akerman Se 777 S. Fla	enterfitt agler Drive, Suite 9	00E	ALL T
West Palm	Beach, FL 33401		聖るこ
5. The name and address of the	new registered agent (if cha (P. O. Box Not Acce	anged) and/or registered of eptable)	fice (if changed):
Dale S. V	Vebber, Esq.		STATE OF S
401 E. Ja	ickson Street, Suite	2500	0 m 5
Tampa, Fl			· ·
The street address of its registe agent, as changed, will be identified the street agent.	red office and the street actical.	ldress of the business offic	ce of its registered
Such change was authorized by authorized by the board.	resolution duly adopted b	oy its board of directors or	by an officer so
£ ( \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	$\bigcirc$	1/:	24/02
(Signature of an officer, chairman	an or vice chairman of the board)	(Pa	ite) (
Robert Stanek, Pres	ident		Ŧ 4
(Printed or type	ed name and title)	mica of myococc for the ab	ove stated
Having been named as register corporation, I hereby accept th I further agree to comply with performance of my duties, and registered agent.	ea agent and to accept ser e appointment as register the provisions of all statut I am familiar with and ac	rvice of process for the aveed agent and agree to act es relative to the proper a cept the obligation of my p	ove stated in this capacity. nd complete position as
Dry SIMM		3/5	102
(Signature of Register	ed Agent)	(Date)	
If signing on behalf of an entity:			
(Typed or Printed Na	me)	(Capacity)	
	* * * FILING FEE: \$	35.00 * * *	

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314