

New York, NY

Albany, NY

Dover, DE

Los Angeles, CA

February 14, 2000

P96000003949

RE: Worker's Health Care Clinic, Inc.

Secretary of State of Florida Division of Corporations 409 East Gaines Street Tallahassee, FL 32399 700003135947---7 -02/15/00--01086--005 *****35.00 *****35.00

Attention:

Corporate Filing Clerk

Kindly file the duplicated Statement of Change of Agent Form for the attached referenced corporation, returning a filed stamped copy to us in the self-addressed, stamped envelope provided for your convenience ASAP.

We are enclosing a check for \$35.00 payable to you for this filing.

Please contact the undersigned at (800) 221-0102, if there are any problems or questions before returning the filing.

Thank you for your assistance.

Sincerely,

John Morrissey

Assistant Vice President

JM:moc Enclosures 00 FEB 15 AM II: 33

Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.050, 607. 1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

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| 1. | The name of the corporation is: Worker's Health Care Clinic, Inc. |
| 2. 3. | The mailing address of the corporation is: 2405 SE 17th St., Ste. 201; Ocala, FL 34471 Date of incorporation/qualification: 1/11/96 Document number: P96000093949 |
| 4. | The name and address of the current registered agent and office: |
| | Wendy A. Kemp |
| | |
| | Ocala, FL 34471 |
| 5. | The name and address of the new registered agent and office: (P.O. Box Not Acceptable) NATIONAL CORPORATE RESEARCH, LTD., INC. |
| | NATIONAL CORPORATE RESEARCH, LTD., INC. |
| • | 1406 Hays Street. Suite #2, Tallahassee, FL 32301 |
| Suc | h change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by board. |
| (Sla | hature of an officer, chairman or vice chairman of the board) (Date) |
| (pig | nature of all officer, charman of vice charman of the board) |
| | elissa Warlow, Vice President |
| (Pri | ted or typed name and title) (Date) |
| the stat | ing been named as registered agent and to accept service of process for the above stated corporation, I hereby accept appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all tes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of any tion as registered agent. |
| .== | Q 2 200 2/140 |
| (Sig | pature of Registered Agent) (Bate) |
| lf s | gning on behalf of an entity: |
| • | John L. Morrissey Assistant Vice President |
| Тур | ed or Printed Name) (Capacity) |
| CR2 | F045(4/95) Filing Fee: \$35.00 |