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May 28, 1999

State of Florida Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Re:

Practical Healthcare Solutions of Florida, Inc.

Our File No. 054007.00001

Dear Sir or Madam:

I enclose for filing the original of the Statement of Change of Registered Office or Registered Agent or Both For Corporations for the above company. Also enclosed is its Check 1825 in the amount of \$35.00 for the filing fee.

Please contact me at the above number if any additional information is required.

100002891001--5 -06/01/99--01105--001 *****35.00 ******35.00

Sincerely,

HOLLAND & KNIGHT LLP

By: A. S. Weekley, Jr., M.D.

ASW/bw Encs. (Check)

RA Chy,

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S	tatutes,
_	d corporation organized under the laws of the State of Florida	
•	lowing statement in order to change its registered office or registered agent, or	oom, m
the State of Flori	orida.	J. Two
1. The name of the	fthe corporation is: Practical Healthcare Solutions of Flori	da, Inc
_	address of the corporation is: 5444 Bay Center Drive, Suite 204	
T	Tampa, Florida 33609-3431	-
3. Date of incorp	orporation/qualification: <u>May 15, 1996</u> Document number: <u>P960000</u>	41713
4. The name and	nd address of the current registered agent and office:	
F	R. Stephen Venable, M.D.	
<u>1</u>	1222 S. Dale Mabry, Suite 618	2 3g
5. The name and	Tampa, Florida 33609 nd address of the new registered agent and office: (P. O. Box Not Acceptable)	6 00 00 00 00 00 00 00 00 00 00 00 00 00
	A. S. Weekley, Jr., M.D., Esq./Holland & Knight LLP	A CONTRACTOR OF THE PARTY OF TH
<u>.</u>	510 Vonderburg Drive, Suite 3005	
-	Brandon, Florida 33511	
The street addre	ress of its registered office and the street address of the business office of its reg ged, will be identical.	istered
Such change wa authorized by th	was authorized by resolution duly adopted by its board of directors or by an office the board.	er so
	Monte 5/9/88	
(Signature o	e of an officer, chairman or vice chairman of the board) (Date)	
	tephen Venable, M.D., Vice President (Printed or typed name and title)	· _
corporation, I h	named as registered agent and to accept service of process for the above stated hereby accept the appointment as registered agent and agree to act in this cape to comply with the provisions of all statutes relative to the proper and complet of my duties, and I am familiar with and accept the obligation of my position as ent.	acity. e
MSM	Signature of Registered Agent) (Date) (Date)	
·		
If signing on behalf	* · · · · · · · · · · · · · · · · · · ·	
	and & Knight LLP Attorney at Law (Typed or Printed Name) (Capacity)	
(.	A=A Kara as a power-in process.	

*** FILING FEE: \$35.00 ***