



APPROVED
AND
FILED

97 APR 30 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 APR 30 PM 12:53 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P96000045493 (9) 1. Corporation Name FLAGLER MEDICAL CENTER, INC.					
Principal Place of Business 9613 S.W. 117TH COURT MIAMI FL 33186		Mailing Address 9613 S.W. 117TH COURT MIAMI FL 33186-2717			
2. Principal Place of Business 21 2300 CORAL WAY Suite, Apt. #, etc. 22 SUITE # 200 City & State 23 MIAMI FLORIDA Zip 24 33145		2a. Mailing Address 26 2300 CORALWAY Suite, Apt. #, etc. 27 SUITE # 200 City & State 28 MIAMI FLORIDA Zip 29 33145		3. Date Incorporated or Qualified 05/29/1996 3a. Date of Last Report 4. FEI Number 65-0679910 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
9. Name and Address of Current Registered Agent FLORIDA ANNUAL REPORT SERVICES, INC. 2300 CORAL WAY MIAMI FL 33145		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code			
11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE: AMADA CANTERA LOPEZ, PRES 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: 4/23/97					