P96000052346

KORN & ZEHMER, P.A.
ATTORNEYS AT LAW

JACKSONVILLE, FLORIDA

PLEASE REPLY TO:
POST OFFICE BOX 550700

JACKSONVILLE, FLORIDA 32255-0700
TELEFAX (904) 296-0384

SUITE 200, SOUTHPOINT BUILDING 6620 SOUTHPOINT DRIVE, SOUTH JACKSONVILLE, FLORIDA 32216 TELEPHONE (904) 296-2111

April 28, 1998

CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Florida Department of State Corporate Division 409 East Gaines Street Tallahassee, Florida 32399

Re: Tampa Medical Plaza, Inc.

500002510595--3 -05/05/98--01033--016 ****122.50 *****35.00

Ladies and Gentlemen:

Enclosed is the original Statement of Change of Registered Office or Registered Agent or Both For Corporations and Resignation of Registered Agent. Also, a check in the sum of \$122.50 is enclosed which represents the following fees: \$87.50 fee to file the Resignation of Registered Agent; \$35.00 fee to file the Change of Registered Office or Registered Agent or Both For Corporations. If you have any questions, please contact the undersigned.

Sincerely,

John W. Zehmer

Enclosure TANNL4.28

VS MAY 1 3 1998

RA Clg.

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, 617.0502, 607.1508, or 617.1508, Florida Statutes and $_{ m modersigned}$ corporation organized under the laws of the State of $_{ m modersigned}$, the
submits the following statement in order to change its registered office or registered agent, or both, it	n the
State of Florida.	
I. The name of the corporation is: Tampa Medical Plaza, Inc.	
	Z
2. The mailing address of the corporation is: 8550 United Plaza, Suite 902	ئ
Baton Rouge, Louisiana 70809	<u>2.</u>
Date of incorporation/qualification: June 18, 1996 Document number: P9600005236) (6) 5
4. The name and address of the current registered agent and office:	.00
Margaret B. Gellatly	
6620 Southpoint Drive South, Suite 200	
Jacksonville, Florida 32216	
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)	-
John H. Zehmer	
6620 Southpoint Drive South, Suite 200	-
Jacksonville, Florida 32216	
The street address of its registered office and the street address of the business office of its registe agent, as changed, will be identical.	red
Such change was authorized by resolution duly adopted by its board of directors or by an officer s	30
authorized by the board.	io
(Signature of an officer, chairman or vice chairman of the board) (Date)	7
(Signature of an oxioos, oxidating of the control o	
(Printed or typed name and title) (Date)	
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacit little agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.	ty.
John Jones 4/27/98	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	•
CR2E045(4/95) - FILING FEE: \$35.00	