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0555023

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000082609**

1. Corporation Name

TENET HOME CARE TAMPA/ST. PETE, INC.

Principal Place of Business	Mailing Address
% MARY H. YUMIBE 3820 STATE STREET SANTA BARBARA CA 93105	% MARY H. YUMIBE 3820 STATE STREET SANTA BARBARA CA 93105

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/07/1996**

4. FEI Number: **75-2678174** [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [ ] Yes [X] No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip / Country	Zip / Country
24 / 25	29 / 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 _____ (NOTE: For profit corporations, the registered agent must sign.) (DATE)
Signature, typed or printed name of registered agent, and title if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VSD	[X] DELETE	11 TITLE	DVS [ ] Change [X] Addition
NAME	BROWN, SCOTT M		12 NAME	Richard B. Silver
STREET ADDRESS	3820 STATE STREET		13 STREET ADDRESS	3820 State Street
CITY-ST-ZIP	SANTA BARBARA CA 93105		14 CITY-ST-ZIP	Santa Barbara, CA 93105
TITLE	P	[ ] DELETE	21 TITLE	[ ] Change [ ] Addition
NAME	FOCHT, MICHAEL H SR.		22 NAME	300000288235A--3
STREET ADDRESS	3820 STATE STREET		23 STREET ADDRESS	-05/04/99--01085--020
CITY-ST-ZIP	SANTA BARBARA CA 93105		24 CITY-ST-ZIP	****150.00 ****150.00
TITLE	EVP	[ ] DELETE	31 TITLE	[ ] Change [ ] Addition
NAME	FETTER, TREVOR		32 NAME	
STREET ADDRESS	3820 STATE STREET		33 STREET ADDRESS	
CITY-ST-ZIP	SANTA BARBARA CA 93105		34 CITY-ST-ZIP	
TITLE	VPT	[ ] DELETE	41 TITLE	[ ] Change [ ] Addition
NAME	MCMULLEN, TERENCE P		42 NAME	
STREET ADDRESS	3820 STATE STREET		43 STREET ADDRESS	
CITY-ST-ZIP	SANTA BARBARA CA 93105		44 CITY-ST-ZIP	
TITLE	EVP	[ ] DELETE	51 TITLE	[ ] Change [ ] Addition
NAME	SMITH, RANDOLPH W		52 NAME	
STREET ADDRESS	14001 DALLAS PARKWAY		53 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75240		54 CITY-ST-ZIP	
TITLE	AS	[X] DELETE	61 TITLE	B. 4/23/99 9900
NAME	LUNDGREN, ALAN		62 NAME	AS [ ] Change [X] Addition
STREET ADDRESS	3820 STATE STREET		63 STREET ADDRESS	Caitlin M. Larsen
CITY-ST-ZIP	SANTA BARBARA CA 93105		64 CITY-ST-ZIP	3820 State Street
				Santa Barbara, CA 93105

14. I 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, with all other like empowered.

SIGNATURE: Caitlin M. Larsen **Caitlin M. Larsen, Asst. Sec.** **4/12/99** **805/563-7075**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (DATE) (DAYTIME TELEPHONE NUMBER)

CR2E034 (11/98)