2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008
Secretary of State

DOCUMENT# P98000047555

Entity Name: SOUTH WALTON MEDICAL CENTER, INC.

Current Principal Place of Business:

9657 HIGHWAY 98 WEST
DESTIN, FL 32550 US

New Principal Place of Business:

10005 -C HIGHWAY 98 WEST
DESTIN, FL 32550 US

Current Mailing Address:

9657 HIGHWAY 98 WEST
DESTIN, FL 32550 US

New Mailing Address:

P.O. BOX 6248
DESTIN, FL 32550 US

FEI Number: 59-3520723 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAUSTON, RONALD B M.D.
9657 HIGHWAY 98 WEST
DESTIN, FL 32550 US

Name and Address of New Registered Agent:

CAUSTON, RONALD B M.D.
10005-C HIGHWAY 98 WEST
DESTIN, FL 32550 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RONALD B. CAUSTON MD 03/05/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CAUSTON, RONALD B M.D.
Address: 9657 HIGHWAY 98 WEST
City-St-Zip: DESTIN, FL 32550 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CAUSTON, RONALD B M.D.
Address: 10005-C HIGHWAY 98 WEST
City-St-Zip: DESTIN, FL 32550 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD B CAUSTON MD PRES 03/05/2008
Electronic Signature of Signing Officer or Director Date