

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # S45582

1. Corporation Name COLUMBIA HOSPITAL CORPORATION OF MIAMI BEACH

Principal Place of Business: ONE PARK PLAZA SUITE 2100 NASHVILLE TN 37203 US; Mailing Address: P.O. BOX 750 P.O. BOX 570 NASHVILLE TN 37202 US

2. Principal Place of Business (21-24) and Mailing Address (26-30) fields for additional offices.

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301

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.

SIGNATURE

Signature, typed or printed name of registered agent, and title, if applicable; (NOTE: Registered Agent's signature required when applicable); DATE

12. OFFICERS AND DIRECTORS

Table with 5 rows for officers/directors, including John M. Franck, Stephen T. Bruan, Kenneth Donahey, Dora A. Blackwood, and Ronald Lee Grubbs.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 64 rows for additions/changes to officers and directors, with handwritten entries for R. Milton Johnson, A. Bruce Moore, David L. Danson, and Ronald Lee Grubbs.

FILED

99 MAR 18 AM 9:21

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

- 3. Date Incorporated or Qualified: 04/16/1991
4. FEI Number: 75-2375281
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: [] Yes [] No

81 Name, 82 Street Address (P.O. Box Number is Not Acceptable): 400002817144--1 -03/24/99--01076--006 ***150.00 PL ***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

D.S.

Division Form F

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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P94000081210 1. Corporation Name COLUMBIA JACKSONVILLE HEALTHCARE SYSTEM, INC.

Principal Place of Business ONE PARK PLAZA NASHVILLE TN 37203 US Mailing Address PO BOX 750 ATTN: TAX DEOT NASHVILLE TN 37202 US

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

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301

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 Signature (Type or print name of registered agent and title if applicable) (NONE) Registered Agent (Type or print name and title) (NONE)

Table with 6 rows of officer/director information including titles (DVP, V, DVST, AS, VD), names (FRANCK, JOHNSON, DONAHEY, BLACKWOOD, ELTON), and addresses (ONE PARK PLAZA, NASHVILLE TN 37203).

Table with 6 rows for additions/changes to officers/directors. Includes handwritten entries: DVP, A. BRUCE MOORE, AS David L. Denson, VP Ronald Lee Grubbs.

FILED 99 MAR 18 AM 10:59 SEC. OF STATE TALLAHASSEE, FLORIDA

- 3. Date Incorporated or Qualified: 11/04/1994
4. FEI Number: 61-1272241
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
7. This corporation owes the current year Intangible Personal Property Tax: Yes/No
8. Name and Address of New Registered Agent

700002817147-1 -03/24/99-01076-007 ***150.00 ***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)