

V68899

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FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4000

FROM: MAHONEY ADAMS & CRISER, P.A.

ACCT#: 076226003514

CONTACT: CORINNE P MCCLURE

PHONE: (904)354-1100

FAX #: (904)798-2697

NAME: PREMIER FAMILY CARE, P.A.

AUDIT NUMBER.....H97000007814

DOC TYPE.....REGISTERED AGENT CHANGE

CERT. OF STATUS..0 PAGES..... 1

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**STATEMENT OF CHANGE OF REGISTERED OFFICE  
OR REGISTERED AGENT, OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of Sections 607.0501 and 607.0502, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

- 1a. The name of the corporation is PREMIER FAMILY CARE, P.A.
- 1b. The mailing address of the corporation is: 4800 Beach Boulevard, Suite 10, Jacksonville, FL 32207
- 1c. Date of incorporation: 10/01/92 Document number: V68899
2. The name and address of the current registered agent and office:  
Stephen J. Clark, M.D., 4800 Beach Boulevard, Suite 10, Jacksonville, FL 32207
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

RAX CO., c/o Mahoney Adams & Criser, P.A.  
50 N. Laura Street, ~~3400 Barnett Center~~ 3300 Barnett Center  
Jacksonville, FL 32202

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its Board of Directors or by an officer so authorized by the Board.

PREMIER FAMILY CARE, P.A.

By: [Signature]  
Stephen J. Clark, President

Dated: 5/6/97

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 capacity. I further 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.

RAX CO.  
By: [Signature]  
Halcyon E. Skinner, President

Dated: May 12, 1997

Prepared by: Linda S. Gemind, Esq.  
Mahoney Adams & Criser, P.A.  
P. O. Box 4099  
Jacksonville, FL 32201  
(904) 354-1100  
Florida Bar No. 0848352

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