2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2013
Secretary of State
CC1425228060

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Entity Name: TALLAHASSEE MEMORIAL HEALTHCARE, INC.

Current Principal Place of Business:

1300 MICCOSUKEE RD.
TALLAHASSEE, FL 32311

Current Mailing Address:

1401 CENTERVILLE RD.
BOX 210
TALLAHASSEE, FL 32308

FEI Number: 59-1917016

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DAVIS, JUDY
RISK MANAGER/TMRMC
1300 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DVC	Title	DS
Name	THORNTON, GLENDA L	Name	GREDLER, FRANK MD
Address	1300 MICCOSUKEE RD	Address	1300 MICCOSUKEE RD
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308
Title	DC	Title	CFO
Name	DOZIER, LAURIE LIII	Name	GIUDICE, WILLIAM A
Address	1300 MICCOSUKEE RD	Address	1300 MICCOSUKEE RD
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308
Title	CEO	Title	DT
Name	O'BRYANT, MARK	Name	BUSCH-TRANSOU, SUSIE
Address	1300 MICCOSUKEE RD	Address	1300 MICCOSUKEE ROAD
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK O'BRYANT CEO 04/30/2013

Electronic Signature of Signing Officer/Director Detail — Date