2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2015
Secretary of State
CC2607728438

DOCUMENT# J96052

Entity Name: FLORIDA MEDICAL CENTER OF NEW PORT RICHEY, INC.

Current Principal Place of Business:

C/O DOUGLAS A. WERT
4648 GRAND BLVD
NEW PORT RICHEY, FL 34652

Current Mailing Address:

C/O DOUGLAS A. WERT
4648 GRAND BLVD
NEW PORT RICHEY, FL 34652

FEI Number: 59-2849658

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA MEDICAL CENTER
4648 GRAND BLVD.
NEW PORT RICHEY, FL 34652 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	D
Name	WERT, DOUGLAS A M.D.
Address	C/O DOUGLAS A. WERT 4648 GRAND BLVD
City-State-Zip:	NEW PORT RICHEY FL 34652

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

SIGNATURE: DOUGLAS A WERT OFFICE MANAGER 04/30/2015

Electronic Signature of Signing Officer/Director Detail — Date