NASHVILLE, IN 57202 05				
FEI Number: 46-0725579			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
HUDSON, KAR 808 CALABRIA ALTAMONTE S				
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: KARRIS R HUDSON				04/23/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT, DIRECTOR		TREASURER, SECRETARY,	
Name	ESTRELLA WATTS, DANITA M	Nama		
Address	PO BOX 23270	Name	THOMAS, CINDY	
City-State-Zip:	NASHVILLE TN 37202	Address	PO BOX 23270	
		City-State-Zip:	NASHVILLE TN 37202	
Title	VP, DIRECTOR			

Current Mailing Address:

PO BOX 23270 NASHVILLE. TN 37202 US

FEI

Name Address

Nai

SWANSON, DALE

PO BOX 23270

City-State-Zip: NASHVILLE TN 37202

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: DANITA M ESTRELLA WATTS

PRESIDENT/DIRECTOR

04/23/2024

Date

Electronic Signature of Signing Officer/Director Detail

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000007442

Entity Name: DANITA'S CHILDREN MEDICAL CENTER, INC.

Current Principal Place of Business:

136 4TH AVENUE SOUTH FRANKLIN. TN 37064