		ter than Sep 30, 2011 ual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 3. New Registered Agent Signature.			
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HOSPITAL DEVELOPMENT PROPERTIES, INC. LEGAL DEPT PO BOX 750 NASHVILLE TN 37202					
4. Corporations: Enter Names Office Held Name		ses of President, Secretary, Director PO Address	ctors and (optional) City	Treasurer State	Country	Postal Code
(Director) President Samuel 1	N. Hazen	One Park Plaza	Nashville	TN	US	37203
VP & Secretary Dora	A. Blackwood	One Park Plaza	Nashville	TH	US	37203
VP & Treasurer David G. Anderson (Director) SVP Donald W. Stinnett (Director) VPAS John M. Franck II		One Park Plaza One Park Plaza	Nashville Nashville	TN TN	us us	37203 37203
		5. Organized Under the Laws of: DELAWARE	6. Signature:	Dana bleeden	l	
C 84732 Name (type or print): Dora A. Blackwood				Vice Pres. Title: & Sec.		
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