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North Florida Medical Centers, Inc.

535 John Knox Road (32303) • P.O. Box 12309 • Tallahassee, FL 32317 • Phone (850) 385-4494 • Fax (850) 298-6050

September 30, 2005

Top Hat Plan Exemption
Employee Benefits Security Administration
Room N-5644
US Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

05 NOV - 1 PM 2:13
OFFICE OF THE DIRECTOR OF THE
DEPARTMENT OF LABOR

Re: Alternative Reporting and Disclosure Statement for [A] Nonqualified Deferred Compensation Plan

In accordance with 29 CFR Section 2520.104-23 of the Department of Labor Regulations, which provides an alternative method for complying with the reporting and disclosure requirements of Part 1 of Title I of the Employee Retirement Income Security Act of 1974, you are hereby notified that the Employer identified below maintains the Plan identified below for the purpose of providing deferred compensation for a select group of management or highly compensated employees, and that all benefits provided by this plan are paid as needed solely from the general assets of that Employer.

Employer's Name: North Florida Medical Centers, Inc.

Employer's Address: 535 John Knox Road
Tallahassee, Florida 32303-4117

Employer Identification Number: 591915144

457(b) which covers three (3) Participants.

Total Number of Plans: 1

North Florida Medical Centers, Inc.
Plan Administrator of the Plans Specified Above

By: 

Date: September 30, 2005

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BAYPORT PLAZA
3000 BAYPORT DRIVE SUITE 950
TAMPA FL 33607-5970

ADDRESS SERVICE REQUESTED



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