

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90296 009 ****61.25

DOCUMENT # 747823

1. Entity Name

TALLAHASSEE MEMORIAL HEALTHCARE, INC.

Principal Place of Business

Mailing Address

1300 MICCOSUKEE RD.
 TALLAHASSEE FL 32311

1401 CENTERVILLE RD.
 BOX 210
 TALLAHASSEE FL 32308-4647

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1917016

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	BOYLE, DENNIS	<i>See Attached</i>
STREET ADDRESS	1300 MICCOSUKEE RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRICKLER, ALEX D MD	
STREET ADDRESS	1300 MICCOSUKEE RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	<input type="checkbox"/> Delete
NAME	CROW, JACK PHD	
STREET ADDRESS	1300 MICCOSUKEE RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MITCHELL, MR. CHARLES	
STREET ADDRESS	1300 MICCOSUKEE RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	<input type="checkbox"/> Delete
NAME	LAWHORN, THOMAS I MD	
STREET ADDRESS	1300 MICCOSUKEE RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	<input type="checkbox"/> Delete
NAME	LEWIS, JOHN R PHD	
STREET ADDRESS	1300 MICCOSUKEE RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32308	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-00 (850) 431-5238

Date Daytime Phone #

CR2E037 (9/99)

Attachment
C0088282
#747823

TALLAHASSEE MEMORIAL HEALTHCARE, INC.

BOARD OF DIRECTORS

D	Mr. Dennis Boyle 1300 Miccosukee Rd. Tallahassee, FL 32308	D	Margaret Lewis, RN, Ph.D. 1300 Miccosukee Rd. Tallahassee, FL 32308
D	Jack Crow, Ph.D. 1300 Miccosukee Rd. Tallahassee, FL 32308	S	Mr. Jerry McDaniel 1300 Miccosukee Rd. Tallahassee, FL 32308
D	Mr. Mike Fields 1300 Miccosukee Rd. Tallahassee, FL 32308	C	Mr. Charles Mitchell 1300 Miccosukee Rd. Tallahassee, FL 32308
D	Michael Forsthoefel, M.D. 1300 Miccosukee Rd. Tallahassee, FL 32308	D	Mr. Millard Noblin 1300 Miccosukee Rd. Tallahassee, FL 32308
D	Jerry Harris, M.D. 1300 Miccosukee Rd. Tallahassee, FL 32308	VC	Mr. Larry Strom 1300 Miccosukee Rd. Tallahassee, FL 32308
D	Esaias Lee, Jr., M.D. 1300 Miccosukee Rd. Tallahassee, FL 32308	D	Mr. John Perry Thomas 1300 Miccosukee Rd. Tallahassee, FL 32308
D	John R. Lewis, Ph.D. 1300 Miccosukee Rd. Tallahassee, FL 32308	T	Ms. Susan S. Thompson 1300 Miccosukee Rd. Tallahassee, FL 32308