### 2001 UNIFORM BUSINESS REPORT (UBR) -

## DOCUMENT # F9300005573

1. Entity Name

**HCA - THE HEALTHCARE COMPANY** 

# FILED May 22, 2001 8:00 am Secretary of State 05-22-2001 90792 013 \*\*\*150.00

Principal Place of Business	Mailing Address	•
ONE PARK PLAZA NASHVILLE TN 37203 US	P.O BOX 750 NASHVILLE TN 37202 US	
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite. Apt. #, etc.	



Suite, Apt. #, etc. City & State		Suite. Apt. #. etc.			DO NOT WRITE IN THIS SPACE					
		City & State		· · · · · · ·	4. FEI Number 75-2497104				Applied Fo	
Zip		Country	Zip Coun		ntry <b>5.</b> . Certificate of Status Desired				3.75 Add	
	and Address of Current Re	enistered Agent	<del></del>		7. Name and Address of New Registered Agent					
	o. Hame e	The Flaction of Carrotte	- grotorou rigorii		Name					
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301			<u> </u> 	Street Address (P.O. Box Number is Not Acceptable)						
			City			FL	Zip Cod	e .		
8. The above	named entity	submits this statement for t	he purpose of changing it	s registere	d office or registe	ed agent, or both, in the	State of Florida.			
							•			
SIGNATURE _	Signature, typed or	printed name of registered agent and	title if applicable (NO	TE. Registered	Agent signature required	when reinstating)		DATE		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!! FEE After MAY 1, 2001 Fee Make Check Payable to D			001 Fee	will be \$550.00	Trust Fund	mpaign Financin Contribution.	g	<b>+</b>	May Be	
11.		OFFICERS AND DI	RECTORS	12.		ADDITIONS/CHANGI				S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIST, JR. ONE PARK NASHVILLE		☐ Delete		TADDRESS ST-ZIP	rman of Board		X	Cnange	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CLIFTON, S ONE PARK NASHVILLE	PLAZA	☐ Delete		T ADDRESS ST-ZIP				] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRANCK, J ONE PARK NASHVILLE	OHN M PLAZA	☐ Delete *			etary and Vic	e Preside	ent 🛚	Change	Adaktion .
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV CAMPBELL ONE PARK NASHVILLE	, VICTOR L PLAZA	☐ Delete		T ADDRESS ST-ZIP				] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV	N, ROBERT A PLAZA	☐ Delete		T ADDRESS ST-ZIP				] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	, v ser i v nahl		☐ Delete	TITLE NAME STREE CITY-	T ADDRESS				] Change	Addition

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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other fike empowered.

SIGNATURE:

John M. Franck II Vice President IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary &

4/26/01

Daytime Phone #

AHachment DHF93UUU5573 AUU68360

# DIRECTORS LIST OF HCA – THE HEALTHCARE COMPANY

#### As of March 22, 2001

Thomas F. Frist, Jr., M.D.

Chairman of the Board

Magdalena H. Averhoff, M.D.

Director

Jack O. Bovender, Jr.

Director

J. Michael Cook

Director

Martin Feldstein

Director

Frederick W. Gluck

Director

Glenda A. Hatchett

Director

T. Michael Long

Director

John H. McArthur

Director

Thomas S. Murphy

Director

Kent C. Nelson

Director

Carl E. Reichardt

Director

Frank S. Royal, M.D.

Director

Harold T. Shapiro

Director