

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006264

FILED
May 03, 2010
Secretary of State

Entity Name: WINDMOOR HEALTHCARE OF PINELLAS PARK, INC.

Current Principal Place of Business:

6640 CAROTHERS PKWY
SUITE 500
FRANKLIN, TN 37067 US

New Principal Place of Business:

Current Mailing Address:

6640 CAROTHERS PKWY
SUITE 500
FRANKLIN, TN 37067 US

New Mailing Address:

FEI Number: 59-3480410 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: JACOBS, JOEY A
Address: 6640 CAROTHERS PARKWAY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: V
Name: DAVIDSON, STEVEN T
Address: 6640 CAROTHERS PARKWAY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: VP
Name: TURNER, BRENT
Address: 6640 CAROTHERS PKWY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: T
Name: POLSON, JACK
Address: 6640 CAROTHERS PKWY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: S
Name: HOWARD, CHRISTOPHER L
Address: 6640 CAROTHERS PKWY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: V
Name: FRUTIGER, ROBERT P
Address: 6640 CAROTHERS PKWY, STE 500
City-St-Zip: FRANKLIN, TN 37067

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER HOWARD

SD

05/03/2010

Electronic Signature of Signing Officer or Director

Date