## **2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000002444

**Entity Name: MEDHOST DIRECT** 

**Current Principal Place of Business:** 

6550 CAROTHERS PARKWAY

SUITE 160

FRANKLIN, TN 37067

**Current Mailing Address:** 

6550 CAROTHERS PARKWAY

SUITE 160

FRANKLIN, TN 37067 US

FEI Number: 62-1847053 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 25, 2021

**Secretary of State** 

6626075926CC

Officer/Director Detail:

Title TREASURER Title PRESIDENT

Name HIGGINS, MATTHEW Name MISCH, KENNETH D.

Address 6550 CAROTHERS PARKWAY Address 6550 CAROTHERS PARKWAY

SUITE 160 SUITE 160

FRANKLIN TN 37067 City-State-Zip: FRANKLIN TN 37067

 Title
 DIRECTOR
 Title
 GENERAL COUNSEL

 Name
 MACKENZIE, SCOTT
 Name
 BARFIELD, KENNY

Address 6550 CAROTHERS PARKWAY Address 6550 CAROTHERS PARKWAY

SUITE 160

City-State-Zip: FRANKLIN TN 37067 City-State-Zip: FRANKLIN TN 37067

TitleCFOTitleASSISTANT SECRETARYNameMISCH, KENNETH D.NameSTEPHENSON, CARLA

Address 6550 CAROTHERS PARKWAY Address 6550 CAROTHERS PARKWAY

SUITE 160 SUITE 160

City-State-Zip: FRANKLIN TN 37067 City-State-Zip: FRANKLIN TN 37067

Title DIRECTOR Title CHAIRMAN

Name PATTISON, STEVE Name ANDERSON, WILLIAM P.

Address 6550 CAROTHERS PARKWAY Address 6550 CAROTHERS PARKWAY

SUITE 160 SUITE 160

City-State-Zip: FRANKLIN TN 37067 City-State-Zip: FRANKLIN TN 37067

## Continues on page 2

SUITE 160

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: WILLIAM P. ANDERSON CEO 04/25/2021

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name DAVIS, AARON Name MOLNER, PHILLIP C. II

Address 6550 CAROTHERS PARKWAY Address 6550 CAROTHERS PARKWAY

SUITE 160 SUITE 160

City-State-Zip: FRANKLIN TN 37067 City-State-Zip: FRANKLIN TN 37067

Title SECRETARY Title CEO

Name BARFIELD, KENNY Name ANDERSON, WILLIAM P.

Address 6550 CAROTHERS PARKWAY Address 6550 CAROTHERS PARKWAY

SUITE 160 SUITE 160

City-State-Zip: FRANKLIN TN 37067 City-State-Zip: FRANKLIN TN 37067