

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000005573

Entity Name: HCA INC.

**Current Principal Place of Business:**

ONE PARK PLAZA  
NASHVILLE, TN 37203

**Current Mailing Address:**

P.O. BOX 750  
ATTN: LEGAL DEPT.  
NASHVILLE, TN 37202 US

FEI Number: 75-2497104

Certificate of Status Desired: No

**Name and Address of Current Registered Agent:**

CT 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title COB  
Name BRACKEN, RICHARD M  
Address ONE PARK PLAZA  
City-State-Zip: NASHVILLE TN 37203

Title DPCEO  
Name JOHNSON, R. MILTON  
Address ONE PARK PLAZA  
City-State-Zip: NASHVILLE TN 37203

Title VPS  
Name FRANCK II, JOHN M  
Address ONE PARK PLAZA  
City-State-Zip: NASHVILLE TN 37203

Title VP  
Name GRUBBS, RONALD LEE JR.  
Address ONE PARK PLAZA  
City-State-Zip: NASHVILLE TN 37203

Title SVP  
Name WATERMAN, ROBERT A  
Address ONE PARK PLAZA  
City-State-Zip: NASHVILLE TN 37203

Title SVPT  
Name ANDERSON, DAVID G  
Address ONE PARK PLAZA  
City-State-Zip: NASHVILLE TN 37203

Title CFO  
Name RUTHERFORD, WILLIAM B  
Address ONE PARK PLAZA  
City-State-Zip: NASHVILLE TN 37203

*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: JOHN M. FRANCK II

VPS

04/15/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date