

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 568721**

1. Corporation Name  
**OKEECHOBEE HOSPITAL, INC.**

Principal Place of Business

**ONE PARK PLAZA  
 NASHVILLE TN 37203  
 US**

Mailing Address

**PO BOX 750  
 ATTN: TAX DEPT.  
 NASHVILLE TN 37202  
 US**

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.  
 1201 HAYS STREET  
 SUITE 105  
 TALLAHASSEE FL 32301**

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83 City  
 84 City

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**04/17/1978**

4. FEI Number

**59-1833934**

Applied For  
 Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Election Campaign Financing  
 Trust Fund Contribution

**\$5.00** May Be  
 Added to Fees

8. This corporation owes the current year Intangible  
 Personal Property Tax  Yes  No

10. Name and Address of New Registered Agent

**500002815515--3  
 -03/23/99--01068--001  
 \*\*\*\*150.00 \*\*\*\*150.00**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title (agent)

(NOTE: Registered Agent Signature Block Excluded)

Date

12. OFFICERS AND DIRECTORS

TITLE	AS	<input type="checkbox"/> DELETE
NAME	BLACKWOOD, DORA A	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	DSVT	<input checked="" type="checkbox"/> DELETE
NAME	DONAHEY, KENNETH	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	ELTON, ROSALYN	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	V	<input type="checkbox"/> DELETE
NAME	R. MILTON JOHNSON	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	DVPS	<input type="checkbox"/> DELETE
NAME	JOHN M FRANCK	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	AS	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
12 NAME	David L. Denson		
13 STREET ADDRESS			
14 CITY-ST-ZIP			
21 TITLE	DVP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
22 NAME	A. Bruce Moore		
23 STREET ADDRESS			
24 CITY-ST-ZIP			
31 TITLE	VP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
32 NAME	Ronald Lee Grubbs		
33 STREET ADDRESS			
34 CITY-ST-ZIP			
41 TITLE	DVP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
42 NAME			
43 STREET ADDRESS			
44 CITY-ST-ZIP			
51 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
52 NAME			
53 STREET ADDRESS			
54 CITY-ST-ZIP			
61 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

**UB  
 3-23-99**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 697, Florida Statutes; and that my name appears in Block 12 or Block 13 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

0923208

CR2E034 (11/98)

February 1, 1999

OFFICERS AND DIRECTORS  
OF  
OKEECHOBEE HOSPITAL, INC.

Jay Grinney	President	One Park Plaza Nashville, TN 37203
Chuck Hall	Senior Vice President	301 E. Las Olas Blvd., 4 <sup>th</sup> Fl. Ft. Lauderdale, FL 33301
Victor L. Campbell	Senior Vice President	One Park Plaza Nashville, TN 37203
Robert Waterman	Senior Vice President	One Park Plaza Nashville, TN 37203
David G. Anderson	Vice President and Treasurer	One Park Plaza Nashville, TN 37203
Bill Rutherford	Vice President	One Park Plaza Nashville, TN 37203
Rosalyn S. Elton	Vice President	One Park Plaza Nashville, TN 37203
*A. Bruce Moore	Vice President	One Park Plaza Nashville, TN 37203
V. Carl George	Vice President	One Park Plaza Nashville, TN 37203
* R. Milton Johnson	Vice President	One Park Plaza Nashville, TN 37203
*John M. Franck II	Vice President and Secretary	One Park Plaza Nashville, TN 37203
Jay Picerno	Vice President	301 E. Las Olas Blvd., 4 <sup>th</sup> Fl. Ft. Lauderdale, FL 33301
James D. Hinton	Vice President	One Park Plaza Nashville, TN 37203
Howard K. Patterson	Vice President	One Park Plaza Nashville, TN 37203
Lyle Reid	Vice President	One Park Plaza Nashville, TN 37203
Ronald Lee Grubbs	Vice President	One Park Plaza Nashville, TN 37203
Steven E. Clifton	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203
Bettye D. Daugherty	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203
Tom C. Gormley	Vice President	One Park Plaza Nashville, TN 37203

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Mike T. Bray	Vice President	One Park Plaza Nashville, TN 37203
Dora A. Blackwood	Assistant Secretary	One Park Plaza Nashville, TN 37203
David L. Denson	Assistant Secretary	One Park Plaza Nashville, TN 37203
Dianne Johnson	Assistant Secretary	One Park Plaza Nashville, TN 37203

**\*Directors  
(Florida)**

Persons employed in the capacity of Chief Executive Officer, Chief Financial Officer, and Assistant Administrator of facilities owned and/or operated by this Corporation, are authorized by the Board of Directors of this Corporation to negotiate and enter into contracts and agreements necessary in the conduct of the day-to-day business of such facility, including, but not limited to, physician contracts, leases, purchase agreements, cost reports, etc., which with the advice of legal counsel, shall be deemed appropriate and advisable, and to execute and deliver Certificates of Resolution required in connection with such contracts and agreements.