AnNUAL REPORT     Seccency of State     Investment     Investment     Investment     Investment     Investment     Investment     Investment     Seccency of State     Seccency of State     Seccency of State     Seccency of State     Seccency     S	FILE NOW: F	ILING FEE IS \$	FILED		
NORTH FLORIDA REGIONAL MEDICAL FOUNDATION, INC.       Processility Flame of Hear each     M. area Andresse       C/O w Heart Marker, R. P. Control Hear each     C/O w Heart Marker, R. P. Control Heart Each       Z/D w Heart Marker, R. P. Control Heart Each     C/O w Heart Marker, R. P. Control Heart Each       Z/D w Heart Marker, R. P. Control Heart Each     C/O w Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O w Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O w Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O w Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O w Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O W Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O W Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O W Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O W Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O W Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O W Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. P. Control Heart Each     C/O W Heart Marker, R. P. Control Heart Each       Z/D W Heart Marker, R. Marker,	CORPORATION ANNUAL REPORT		ndra B. Mortham Secretary of State	Feb 13 1998 8:00am Secretary of State	
Processes Proce	DOCUMENT # 7303	00 (1	)		
CO W LEMPT BABER, JR. PC DOX S00 GANESSALE FL 2002       3. Data Incorporated or Qualified DIZE/1994.         2. Principal Them of Backets.       2. Data Incorporated or Qualified DIZE/1994.         2. Principal Them of Backets.       2. Maining Address.         2. Data Incorporated or Qualified DIZE/1994.       Applied Far 23-742.55.01         2. Data Incorporation of Status Deviced       Far Braueted Far Braueted Far Braueted Dize Corporation Status Deviced         2. Data Incorporation of Status Deviced       9. Certification of Status Deviced Far Braueted Dize Corporation Status Deviced Graphics Into Corporation Corporatio			DN, INC.		
2. Proceedings Address 5. Conflicted of Status Desired Status St	C/O W HENRY BARBER, JR. P.O. BOX 850	C/O W HENRY BAI P.O. BOX 850	-	07/29/1974	Applied For
21       Solid: Anil #, etc.       26       Solid: Anil #, etc.       Free Required         22       City & State       27       City & State       7       Is Bits Anil #, etc.       7       Is Bits Anil #, etc.       7       Solid: Anil #, etc.       7       Solid: Anil #, etc.       7       Is Bits Anil#, etc.       7       Is Bit	2. Principal Place of Business	2a. Mailing Addre	SS		Not Applicable
22     City & State     27     Truet Fund Contribution     Addet to Fees       27     Canaby     28     7. Is this nonprofit corporation a biomoving association as the control corporation as biomoving association as the corporation asubiomicon as the corporation as the corporation asociation as the			atc		Fee Required
27:     Country     B. This corporation over one paid the current wear hampable       27:     28:     29:     29:     30:       28:     29:     29:     30:     Personal Address of New Registered Agent       30:     Name and Address of Current Registered Agent     10:     Name and Address of New Registered Agent       30:     Name and Address of Current Registered Agent     10:     Name and Address of New Registered Agent       30:     Name and Address of Current Registered Agent     10:     Name and Address of New Registered Agent       30:     Name and Address of Current Registered Agent     11:     12:     Street Address (P O. Box Number Is Not Acceptable)       30:     Street Address (P O. Box Number Is Not Acceptable)     30:     Fee Address (P O. Box Number Is Not Acceptable)       30:     Street Address (P O. Box Number Is Not Acceptable)     30:     Fee Address (P O. Box Number Is Not Acceptable)       30:     Street Address (P O. Box Number Is Not Acceptable)     30:     Fee Address (P O. Box Number Is Not Acceptable)       30:     Street Address (P O. Box Number Is Not Acceptable)     30:     Fee Address (P O. Box Number Is Not Acceptable)       30:     Street Address (P O. Box Number Is Not Acceptable)     30:     Street Address (P O. Box Number Is Not Acceptable)       30:     Street Address (P O. Box Number Is Not Acceptable)     30:     Street Address (P O. Box					Added to Fees
B. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     11. Anne and Address of New Registered Agent     20 Ne iss streEt     GAINESVILE FLORIDA FL     42     Street Address (P.O. Box Number is Not Acceptable)     44		4 · · · · · · · · · · · · · · · · · · ·	Country	Yes	
BARBER, W. HENRY, JR.     20     Street Address (P.O. Box Number Is Not Acceptable)       20     FLORIDA FL     21       21     Antessville FLORIDA FL     24       23     City     FL       24     City     FL       25     20     Code       26     Street Address (P.O. Box Number Is Not Acceptable)       26     City     FL       26     City     FL       27     Construction of the totic procession of totic procession of the totic procession of totic procession of the totic procession of totic		· · · · · · · · · · · · · · · · · · ·	30		
III.       Put structure to the provisions of Sectores. E17 05:02 and E12 10:06. Fonds Statutes, the above harmed corporation submits this statement. for the upper structure appointment as register appointment appointment as register appointment appointm	203 NE 1ST STREET		83	dress (P.O. Box Number is Not Acceptable)	
ITTLE       D       DFLEFL       ITTLE       Change       Addit         NAME       GRESHAM, W. MARVIN       13 STRET ADDRESS       STRET ADDRESS       GAMESVILLE FL       ItTLE       ItTLE<	office or registered agent, or both, in the S agent 1 am familiar with and accept the o SIGNATURE	itate of Florida, Such chang bligations of, Section 617.0	e was authorized by the corpor 503, Florida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered ppointment as registered
NAME     GRESHAM, W. MARVIN     12 NAME       STRET ADDRESS     3246 S.W. 35TH BLVD.     13 STRET ADDRESS       GAINESVILLE FL     14 GIY-ST-2P       NAME     Change     Addit       STRET ADDRESS     14 GIY-ST-2P       NAME     KRAMER, DEAN C.       STRET ADDRESS     22 NAME       STRET ADDRESS     22 NAME       GAINESVILLE FL     21 THE       NAME     STRET ADDRESS       GAINESVILLE FL     21 GIY-ST-2P       GAINESVILLE FL     31 GILF FE       STRET ADDRESS     20 N.E. FIRST STREET       GAINESVILLE FL     32 NAME       STRET ADDRESS     33 STRET ADDRESS       GAINESVILLE FL     34 GIY-ST-2P       GAINESVILLE FL     34 GIY-ST-2P       THE     D       DRAME     BOYAY, JOHN C.       STRET ADDRESS     42 GIY-ST-2P       GAINESVILLE FL     44 GIY-ST-2P       THE     DRET ADDRESS       GIY-ST-2P     GAINESVILLE FL       MAME     53 STRET ADDRESS       GIY-ST-2P     GAINESVILLE FL       MAME     53 STRET ADDRESS		··· ···		ADDITIONS/CHANGES TO OFFICERS AI	and the second
Inte       D       DELTITE       21 Title       Change       Addit         NAME       KRAMER, DEAN C.       628 N.W. 9TH BLVD.       23 Street ADDRESS       24 CHY-ST-20P	NAME GRESHAM, W. MARVIN STREET ADDRESS 3246 S.W. 35TH BLVD.		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST 2P       GAINESVILLE FL       2 4 CITY-ST-2P         INTE       SD       DELETE         STRET ALDRESS       23 STREFT ADDRESS         CITY-ST-2P       GAINESVILLE FL       3 STREFT ADDRESS         GAINESVILLE FL       DELETIE       4 CITY-ST-2P         TITLE       TO       DELETIE         NAME       BOVAY, JOHN C.       4 ZIMAK         STREFT ADDRESS       633 NW 8TH AVE       4 STREFT ADDRESS         CITY-ST-2P       GAINESVILLE FL       1 Change         MAME       DVAY, JOHN C.       4 STREFT ADDRESS         GAINESVILLE FL       1 DELETIE       4 CITY-ST-2P         MAME       CUNNINGHAM, RICHARD W.       5 STREFT ADDRESS         STREFT ADDRESS       GAINESVILLE FL       1 DELETIE         D       DELETIE       5 STREFT ADDRESS         CITY-ST-2P       GAINESVILLE FL       6 STREFT ADDRESS         GAINESVILLE FL       0 DELETIE       5 STREFT ADDRESS         CITY-ST-2P       GAINESVILLE FL       6 STREFT ADDRESS         GAINESVILLE F	TITLE D KRAMER, DEAN C.	DEL	FTE 21 TITLE 22 NAME		Change Addition
NAME     BÅRBER, W. HENRY, JR.     32 NAME       STREET ADDRESS     203 N.E. FIRST STREET     33 STREET ADDRESS       CITY-SI-ZIP     GAINESVILLE FL     34 CITY-SI-ZIP       TITLE     TD     DELETE     41 TITLE       STREET ADDRESS     GAINESVILLE FL     Change     Addit       NAME     BOVAY, JOHN C.     4.2 NAME     43 STREET ADDRESS       GITY-SI-ZIP     GAINESVILLE FL     44 CITY-SI-ZIP       TITLE     DP     DELETE     51 TITLE       OP     DELETE     51 TITLE     Change       NAME     CUNNINGHAM, RICHARD W.     52 NAME       STREET ADDRESS     GAINESVILLE FL     Change     Addit       NAME     CUNNINGHAM, RICHARD W.     53 STREET ADDRESS     GAINESVILLE FL       OP     DELETE     51 TITLE     Change     Addit       NAME     CUNNINGHAM, RICHARD W.     53 STREET ADDRESS     GAINESVILLE FL     Change     Addit       TITLE     D     DELETE     51 TITLE     Change     Addit       NAME     CAUTHEN, JOSEPH C.     63 STREET ADDRESS     63 STREET ADDRESS     GAINESVILLE FL     Change     Addit       NAME     CAUTHEN, JOSEPH C.     63 STREET ADDRESS     63 STREET ADDRESS     GAINESVILLE FL     TITLE     Change     Addit	CITY-ST ZIP GAINESVILLE FL	<b></b>	2 4 CITY-ST-ZIP		
TITLE       TD       DELETE       41 TITLE       Change       Addit         NAME       BOVAY, JOHN C.       4 2 NAME       4 2 NAME       4 2 NAME         STREET ADDRESS       633 NW 8TH AVE       4 3 STREET ADDRESS       4 4 CITY - ST - ZIP       GAINESVILLE FL	NAME BARBER, W. HENRY, JR. STREET ADDRESS 203 N.E. FIRST STREET		3.2 NAME		Change Addition
GIV-SI-ZIP       GAINESVILLE FL       44 CIV-SI-ZIP         DP       DETETE       51 TITLE         NAME       CUNNINGHAM, RICHARD W.       52 NAME         STREET ADDRESS       1130 NW 6TH TERR.         GAINESVILLE FL       53 STREET ADDRESS         GAINESVILLE FL       54 CIV-ST-ZIP         GAINESVILLE FL       DETETE         D       DETETE         STREET ADDRESS       53 STREET ADDRESS         GAINESVILLE FL       DETETE         D       DETETE         STREET ADDRESS       64 CIV-ST-ZIP         CAUTHEN, JOSEPH C.       63 STREET ADDRESS         GAINESVILLE FL       Change         Addit         STREET ADDRESS       610 9TH BLVD.         CITY-ST-ZIP       64 CITY-ST-ZIP         CITY-ST-ZIP       64 CITY-ST-ZIP         14.       Thereby certify that the information supplemental annual report is true and accurate and that my signalure shall have the same legal effect as if made under eath; that Lam an officer or drive tor of the corporation or the necesseries of true and accurate and that my signalure shall have the same legal effect as if made under eath; that Lam an officer or drive tor of the corporation or the necesseries of the corporation or the ne	TITLE TD BOVAY, JOHN C.		TE 4.1 TITLE		Change Addition
STREET ADDRESS       1130 NW 6TH TERR.       53 STREET ADDRESS         GAINESVILLE FL       54 City-st-ZIP         D       DELETE       61 TitLE         Addit       61 TitLE         STREET ADDRESS       6510 9TH BLVD.         GAINESVILLE FL       63 STREET ADDRESS         GAINESVILLE FL       Change         Addit       6510 9TH BLVD.         GAINESVILLE FL       64 City-st-ZIP         Thereby certify that the information supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an efficient or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and that my name appears in Block 130 chapter 617, Florida Statutes; and t	CITY-ST-ZIP GAINESVILLE FL		4.4 CITY - ST - ZIP		Change Addition
D       DELETE       61 TITLE       61 TITLE       62 NAME         STREET ADDRESS       CAUTHEN, JOSEPH C.       63 STREET ADDRESS       63 STREET ADDRESS         STREET ADDRESS       GAINESVILLE FL       64 CITY-ST-ZIP       64 CITY-ST-ZIP         14.       Thereby certily that the information supplied with this bling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the receiver or trustee engowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 of change of the rung and indexes.	STREET ADDRESS 1130 NW 6TH TERR.	<b>W</b> .	5 3 STREET ADDRESS		
14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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 eath; that I am an officer or director of the corporation or the receiver or trustee enjoyeered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an athefment with an address.	NAME CAUTHEN, JOSEPH C. 6510 9TH BLVD.	DELE	TE 61 THE 62 NAME 63 STREET ADDRESS		Change Addition
SIGNATURE: John C Borry 2/3/48 352 372 535	<ol> <li>I hereby certify that the information supplies indicated on this annua' report or supplement.</li> </ol>	ental annual report is true à	ualify for the exemption stated in nd accurate and that my signat	ure shall have the same legal effect as if made it	under oath; that I am an