1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 737479

Corporation Name

TALLAHASSEE MEMORIAL HEALTHCARE FOUNDATION, INC.

Principal Place of Business

1331 E SIXTH AVE TALLAHASSEE FL 32303-6505 Mailing Address

1331 E SIXTH AVE

TALLAHASSEE FL 32303-6505

FILED May 10, 1999 8:00 am § Secretary of State

05-10-1999 90132 038 ****61.25



2. Principal F	Place of Business	2a. Mailing Address		.	Date Incorporated or Qualifed 10 (00 1407C)				
21	<u>-</u>	26			12/08/1976				
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			4. FEI Number	<u> </u>	olied For		
22		27			59-1727645		Applicable		
City & Sta	te	City & State			5. Certifcate of Status Desired	\$8.75 A Fee Red			
Zip	Country	Zip	Country	1	6. Election Campaign Financing	\$5.00	May Be		
24	25	29 3	ō		Trust Fund Contribution	Added to	Fees		
*I	9. Name and Address of Curren				10. Name and Address of New Registered	d Agent			
			81	Name					
DAME II	IDV		_		(D.O. D. Allertonia Mat Accomtable)				
DAVIS, JU			82	Street Addr	ress (P.O. Box Number is Not Acceptable)				
1300 MICCOSUKEE RD.			83						
TALLAHA	SSEE FL 32308			1					
			84	City	F	85 Zip C	ode		
office or	registered agent or both in the State	of Florida. Such change was auti	horized by	the corporation	poration submits this statement for the purpose con's board of directors. I hereby accept the app	of changing its on the changing its of the cha	registered jistered		
agent. I a	am familiar with, and accept the obligation	tions of, Section 617.0503, Florid	la Statutes	i.					
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: R	legisted Age	nt signature require	od when reinstating) DATE				
12.	OFFICERS AN	ID DIRECTORS	13.	·	ADDITIONS/CHANGES TO OFFICERS A				
TITLE	100	☐ DELETE	1.1 TITLE			Change	Addition		
NAME	BLE, RAYMOND PHD		1.2 NAME						
STREET ADDRESS	217 VESTCOTT BLDG COPELA	ND & COLLEGE STS	1.3 STREE	TADDRESS					
CITY-ST-ZIP	TALLANASSEE FL 32306		1,4 CITY-S	iT-ZiP					
TITLE	SD	ELETE	2.1 TITLE			[] Change	☐ Addition		
NAME	BAGGETT, IN		2.2 NAME						
	ATAT BARBINI DD			T ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP	TALLAHASSEE FL 32312	□ DELETE	2. 4 CfTY-8 3.1 TITLE	51-28		Change	Addition		
TITLE	D DECOM PERON	SEE ATTACHED							
NAME	BURLESON, BEERLY		3.2 NAME						
STREET ADDRESS	- ·			TADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL 32303	7	3.4. CITY-5	ST-ZIP		☐ Change	Addition		
TITLE	D	☐ DELETE	4.1 TITLE			☐ Change	☐ vacinon		
NAME	CROSBY, BOB		4. 2 NAME						
STREET ADDRESS	9 GILCREASE LN		4.3 STREE	TADDRESS					
CITY-ST-ZIP	QUINCY FL 23251		4.4 CITY-S	T- ZIP					
TITLE	TD	☐ DELETE	5.1 TITLE			☐ Change	☐ Addition		
NAME	HALEY, WALTER		5.2 NAME	1					
STREET ADDRESS			5.3 STREE	TADORESS					
CITY-ST-ZIP	TALLAHAS SEE FL 32315		5.4 CITY-S	ST-ZIP					
TITLE	D D	□ DL ETE	6.1 TITLE	 		☐ Change	Addition		
NAME	KNOX, JENNINGS		6.2 NAME	1					
				TADORESS					
STREET ADDRESS	s 626 W. GAINES ST		0.5 G 114EC						

ALLAHASSEE FL 32301

14. I hereby 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 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 617, 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:

SIGNOULERE REQUIRED Moore

4-26-99

(850)681 - 5380

Daytime Phone i

CR2E037 (11/98)

737479 53242090/3238 TALLAHASSEE MEMORIAL HEALTHCARE FOUNDATION, INC.

BOARD OF DIRECTORS

SD	Ms. Lyn Baggett 1331 E 6th Avenue Tallahassee, FL 32303	D	Ms. Carol Winchester 1331 E 6th Avenue Tallahassee, FL 32303
D	Ms. Beverly Burleson 1331 E 6th Avenue Tallahassee, FL 32303	D	Mr. Millard Noblin 1331 E 6th Avenue Tallahassee, FL 32303
D	Mr. Rayond Bye, Ph.D. 1331 E 6th Avenue Tallahassee, FL 32303	TD	Mr. Leonard Pepper 1331 E 6th Avenue Tallahassee, FL 32303
D	Mr. Gary Wright 1331 E 6th Avenue Tallahassee, FL 32303	CD	Ms. Almena Pettit 1331 E 6th Avenue Tallahassee, FL 32303
VD	Mr. Walter Haley 1331 E 6th Avenue Tallahassee, FL 32303	D	Ms. Julia Robinson 1331E 6th Avenue Tallahassee, FL 32303
D	Mr. Tim Warfel 1331 E 6th Avenue Tallahassee, FL 32303	D	James L. Rodgers, D.D.S. 1331 E 6th Avenue Tallahassee, FL 32303
D '	Alma Littles, M.D. 1331 E 6th Avenue Tallahassee, FL 32303	J	Mr. James C. Smith 1331 E 6th Avenue Tallahassee, FL 32303
D	Al C. McCully, M.D. 1331 E 6th Avenue Tallahassee, FL 32303	D	E. Ray Solomon, Ph.D. 1331 E 6th Avenue Tallahassee, FL 32303
⊅	Duncan Moore 1331 E 6th Avenue Tallahassee, FL 32303	D	Mr. Ken Stafford 1331 E 6th Avenue Tallahassee, FL 32303
D	Isaac Moore, M.D. 1331 E 6th Avenue Tallahassee, FL 32303	Ď	Ms. Mary Visconti 1331 E 6th Avenue Tallahassee, FL 32303