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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **747823** **(3)**

1. Corporation Name

TALLAHASSEE MEMORIAL REGIONAL MEDICAL CENTER, IN C.

Principal Place of Business	Mailing Address
1300 MICCOSUKEE RD. TALLAHASSEE FL 32311	1300 MICCOSUKEE RD. TALLAHASSEE FL 32311

3. Date Incorporated or Qualified: 06/27/1979

4. FEI Number: 59-1917016 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

Zip (24) Country (25) | Zip (29) Country (30)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DAVIS, JUDY
RISK MANAGER/TMRMC
1300 MICCOSUKEE ROAD
TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOORE, DUNCAN SEE ATTACHED 1300 MICCOSUKEE RD. TALLAHASSEE FL 32308	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LAWHORN, THOMAS I. MD 1405 CENTERVILLE ROAD #5000 TALLAHASSEE FL 32308	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRICKLER, ALEX D., M.D. 1705 SOUTH ADAMS STREET TALLAHASSEE FL 32301	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LEWIS, JOHN R. PH D 401 EAST VIRGINIA STREET TALLAHASSEE FL 32301	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD HUGHES, PEGGY 8887 SALCOATES COURT TALLAHASSEE FL 32312	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCDANIEL, JERRY 602 HILLCREST ST. TALLAHASSEE FL 32308	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/97)

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.

SIGNATURE: [signature] REQUIRED 3-9-98 681-5238

BOARD OF DIRECTORS

TALLAHASSEE MEMORIAL REGIONAL MEDICAL CENTER, INC.

1997-98

Addresses

D
Mr. Dennis Boyle
John H. Phipps, Inc.
3110 Capital Circle, N.E.
Tallahassee, FL 32308

D
Alex D. Brickler, M.D.
1304 Hodges Drive
Tallahassee, FL 32308

D
Jack Crow, Ph.D.
NHMFL
1800 East Paul Dirac Drive
Tallahassee, FL 32306

D
Mr. John K. Humphress
1040 East Park Ave.
Tallahassee, FL 32301

DV
Thomas I. Lawhorn, M.D.
1405 Centerville Road
Suite 5000
Tallahassee, FL 32308

DC
John R. Lewis, Ph.D.
The Chesley House
401 East Virginia Street
Tallahassee, FL 32301

D
Margaret Lewis, RN, Ph.D.
FAMU School of Nursing
Corner Martin Luther
King/Palmer St.
Tallahassee, FL 32307

D
Mr. Jerry McDaniel
802 Hillcrest Avenue
Tallahassee, FL 32308

DT
Mr. Charles Mitchell
3121 Hartsfield Road
Tallahassee, FL 32303

DS
Mr. J. Brent Pichard
2211 Ellicott Drive
Tallahassee, FL 32312

D
Julia R. St. Petery, M.D.
1132 Lee Avenue
Tallahassee, Florida 32303

D
Mr. Larry Strom
3127 West Tennessee St.
Tallahassee, FL 32304

D
Mr. John Perry Thomas
Thomas, Howell & Ferguson
2120 Killearney Way
Tallahassee, FL 32308

D
Ms. Susan S. Thompson
Thompson & Shaw
3520 Thomasville Road
4th Floor
Tallahassee, FL 32308