

FILE NOW: FILING FEE IS \$61.25

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May 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 759011 (0)
1. Corporation Name
UNIVERSITY MEDICAL CENTER, INC.

Principal Place of Business 655 W 8th Street Jacksonville, FL 32209	Mailing Address 653-1 W. 8th Street Suite 4060 Jacksonville, FL 32209
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2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 06/30/1981	4. FEI Number 59-2142859	Applied For ☐ Yes ☒ No
5. Certificate of Status Desired ☐ Yes ☒ No	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No	\$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
**FALCK, WILLIAM E.
653-1 W. 8th Street, Suite 4060
Jacksonville, Florida 32209**

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 **April 29, 1998**

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ DELETE
C Neims, Allen H. Room M-110, Box 100215 NA Gainesville, FL 32601	(N/A)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ DELETE
D Gregg, John F. 655 W. 8th St. Jacksonville, FL 32209	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE
TD Register, Jr., George R. 6800 Southpoint Pkwy 101 Jacksonville, FL 32216	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE
D Russo, Jr., Louis S. 653-1 W. 8th Street Jacksonville, FL 32209	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE
PD McGriff, III, W.A. 655 W. 8th Street Jacksonville, FL 32209	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE
SD Paul, Pamela Y. 963 Ponte Vedra Boulevard Ponte Vedra Beach, FL 32082	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TD Register, Jr., George R. 6800 Southpoint Pkwy 101 Jacksonville, FL 32216	
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☒ Change ☐ Addition
PD McGriff, III, W.A. 655 W. 8th Street Jacksonville, FL 32209	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☒ Addition
D Spates, L. Jerome 4727 Lannie Road Jacksonville, FL 32219	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☒ Addition
D Danford, Richard D. 233 West Duval Street Jacksonville, FL 32202	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
200002538232 -05/28/98--01016--007	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition
***61.25	

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 recipient 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 as an attachment with an address.

SIGNATURE: _____ W.A. McGriff, III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date **April 29, 1998** 9041
Daytime Phone # **549-3002**

CFR2037 (10/97)

pg 2 of 2

1998 Nonprofit Annual Report
UNIVERSITY MEDICAL CENTER, INC.
Continuation of Block 12

VCD

Ives, John E.
5723 S.W. 36th Way
Gainesville, Florida 32608

CD

O'Steen, Harold S.
759 Edgewood Avenue North
Jacksonville, FL 32205

D

McIntosh, C.B.
3160 Edgewood Avenue West
Jacksonville, FL 32209

D

Schiebler, Gerold L.
University of Florida
College of Medicine
1600 Archer Road
Gainesville, Fl 32610

D

Nuss, Robert C.
653-1 West 8th Street
Jacksonville, FL 32209

D

Stein, David A.
9009 Regency Square Boulevard
Jacksonville, FL 32211

D

Coughlin, Cory J. (Deleted)
655 West 8th Street
Jacksonville, Fl 32209