

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90117 002 ***150.00

0665469

DOCUMENT # 824217

1. Entity Name

AMERICAN MEDICORP DEVELOPMENT CO.

Principal Place of Business

Mailing Address

ONE PARK PLACE
 P.O. BOX 740026 ATTN: TAX DEPT.
 NASHVILLE TN 37203
 US

PO BOX 750
 P.O. BOX 570
 NASHVILLE TN 37202
 US

00031070



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-1696018

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE AS Delete
 NAME ROTH, KENNETH K
 STREET ADDRESS ONE PARK PLAZA
 CITY-ST-ZIP NASHVILLE TN 37203

TITLE DVP Change Addition
 NAME R. Milton Johnson
 STREET ADDRESS One Park Plaza
 CITY-ST-ZIP Nashville TN 37203

TITLE AS Delete
 NAME MOISTER, LISA MARIE
 STREET ADDRESS ONE PARK PLAZA
 CITY-ST-ZIP NASHVILLE TN 37203

TITLE D VPS Change Addition
 NAME John M. Franck II
 STREET ADDRESS One Park Plaza
 CITY-ST-ZIP Nashville TN 37203

TITLE AS Delete
 NAME HAASE, JOSEPH STEPHEN
 STREET ADDRESS ONE PARK PLAZA
 CITY-ST-ZIP NASHVILLE TN 37203

TITLE AS Change Addition
 NAME David DENSON
 STREET ADDRESS One Park Plaza
 CITY-ST-ZIP Nashville TN 37203

TITLE AS Delete
 NAME GENTILE, CHRISTOPHER
 STREET ADDRESS ONE PARK PLACE
 CITY-ST-ZIP NASHVILLE TN 37203

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V Delete
 NAME MOORE, A BRUCE
 STREET ADDRESS ONE PARK PLACE
 CITY-ST-ZIP APOPKA FL 32703

TITLE DVP Change Addition
 NAME Moore Jr., A. Bruce
 STREET ADDRESS One Park Plaza
 CITY-ST-ZIP Nashville TN 37203

TITLE VP Delete
 NAME FLUSCHE, TIM
 STREET ADDRESS 9100 ARBORTEUM PKSY #140
 CITY-ST-ZIP RICHMOND VA 23236

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David Denson
Assistant Secretary

3-9-01
 Date

(615) 344-2575
 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)