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FILED

May 14 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 833971 (5)

1. Corporation Name

INNER HARBOUR HOSPITALS, LTD., A NONPROFIT CORPORATION

Principal Place of Business

HC 62
BOX 73
CARRABELLE FL 32322-9711

Mailing Address

4685 DORSETT SHOALS ROAD
DOUGLASVILLE GA 30135-49213. Date Incorporated or Qualified
03/11/19753a. Date of Last Report
04/28/1996

4. FEI Number

58-0873694

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

BARCLAY, JAMES M
131 N GADSDEN ST
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83 100002190931

-05/27/97-01019-021

84 City

***61.25

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TD
NAME IZENOUR, STEVE
STREET ADDRESS 4685 DORSETT SHOALS RD.
CITY-ST-ZIP DOUGLASVILLE GA ☒ DELETETITLE VCT
NAME BOLTON, IRIS
STREET ADDRESS 4685 DORSETT SHOALS RD.
CITY-ST-ZIP DOUGLASVILLE GA ☐ DELETETITLE CD
NAME SMUCKER, TIM
STREET ADDRESS 4685 DORSETT SHOALS RD
CITY-ST-ZIP DOUGLASVILLE GA 30135 ☐ DELETETITLE D
NAME HATCHER, HERSCHEL
STREET ADDRESS 4685 DORSETT SHOALS RD
CITY-ST-ZIP DOUGLASVILLE GA 30135 ☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE TD ☒ Change ☐ Addition
1.2 NAME SCROGGY, RONALD
1.3 STREET ADDRESS 4685 DORSETT SHOALS ROAD
1.4 CITY-ST-ZIP DOUGLASVILLE GA 301352.1 TITLE C ☒ Change ☐ Addition
2.2 NAME HUCKABY, HANK
2.3 STREET ADDRESS 4685 DORSETT SHOALS ROAD
2.4 CITY-ST-ZIP DOUGLASVILLE GA 301353.1 TITLE T ☒ Change ☐ Addition
3.2 NAME MAYHEW, HELYN
3.3 STREET ADDRESS 4685 DORSETT SHOALS ROAD
3.4 CITY-ST-ZIP DOUGLASVILLE GA 301354.1 TITLE S ☒ Change ☐ Addition
4.2 NAME MARSHALL, GAIL
4.3 STREET ADDRESS 4685 DORSETT SHOALS ROAD
4.4 CITY-ST-ZIP DOUGLASVILLE GA 301355.1 TITLE TR ☒ Change ☐ Addition
5.2 NAME EDWARDS, JERALD
5.3 STREET ADDRESS 4685 DORSETT SHOALS ROAD
5.4 CITY-ST-ZIP DOUGLASVILLE GA 301356.1 TITLE TR ☒ Change ☐ Addition
6.2 NAME DAHLKE, WAYNE
6.3 STREET ADDRESS 4685 DORSETT SHOALS ROAD
6.4 CITY-ST-ZIP DOUGLASVILLE GA 30135

14. I do 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HERSCHEL HATCHER

4/25/97 770 942-2391

Daytime Phone # 0075773

CR2E037 (9/96)