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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 849057 (5)

1. Corporation Name

GALENDECO, INC.



Principal Place of Business

Mailing Address

ONE PARK PLAZA
NASHVILLE TN 37203
US

P.O. BOX 570
ATTN: TAX DEPT
NASHVILLE TN 37202
US

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

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P VANDEWATER, DAVID T. [] DELETE

ONE PARK PLAZA

NASHVILLE TN

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SVD BRAUN, STEPHEN T. [] DELETE

ONE PARK PLAZA

NASHVILLE TN

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SVD COLBY, DAVID C. [] DELETE

ONE PARK PLAZA

NASHVILLE TN

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SVD SCHWEINHART, RICHARD A. [] DELETE

ONE PARK PLAZA

NASHVILLE TN

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VPF GRECO, SAMUEL A. [X] DELETE

201 W MAIN STREET

LOUISVILLE KY

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S KROGER, JOAN O. [X] DELETE

201 W. MAIN ST.

LOUISVILLE KY

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Nashville, TN 37203

DIV

Nashville, TN 37203

VTD

Nashville, TN 37203

VTD

Nashville, TN 37203

R. Milton Johnson

One Park Plaza

Nashville, TN 37203

John M. Franck

One Park Plaza

Nashville, TN 37203

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, 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

John Franck

Date

4-4-96 (615) 327-9551

Daytime Phone #

CR2E034 (12/95)