FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

THE GLNETWORK OF SOUTH FLORIDA J. P.

1a. DOCUMENT # **B9600000502**

DIVISION OF CORPORATIONS

97 DEC 22 PM 2: 12



			0012/30		
Mailing Address	Principal Office Address		3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
ONE BURTON HILLS BLVD., STE. 350 NASHVILLE TN 37215	E BURTON HILLS BLVD STE. 350 ONE BURTON HILLS BLVD STE. 350		12/27/1996 3a. Date of Last Report	\$24,000.00	
			01/10/1997	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Malling Address	2a. Principal Office Address		4. State or Country of Formation	\$ 24,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & State		62-1647398 7. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required	
Žip Country	Zip Country		8. Make check payable to: Dept. of	Fee Required to check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office		
NRAI SERVICES, INC.		Name Street Address (P.O. Box Number Is Not Acceptable)			
526 EAST PARK AVENUE TALLAHASSEE FL 32301		Suite, Apr. #, etc.			
		City FL 71p Code			
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)	egistered agent, or both, in the State of Flor			e State of Florida, submits this statement	
A GENERAL PARTNER THAT	IS A CORPORATION, L BE REGISTERED AN		PARTNERSHIP OR OTHER	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner	11b. City, State & Zip Code	11c. Registration/ Document Number	
AMSURG SOUTH FLORIDA NETWORK	ONE BURTON HILLS BLVI		NASHVILLE TN 37215	F96000006822	
			9000023 -01/06/ ****27	3906895 9801034011 1.75 ****271.75	
Note: General partners MAV NOT	he changed on this form	an ama	andment must be filed to che	ngo o general nerther	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner

12. Ado 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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE	Classi	Sr.	Jul	m
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1. Gu/mi , TREAS | Sec

Davime Telephone Number 415-445 -/293

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