

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F04878

1. Entity Name

BARTOW HEALTHCARE PARTNER, INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

00 MAY -8 PM 1:48

Principal Place of Business

Mailing Address

ONE PARK PLAZA  
NASHVILLE TN 37203  
US

PO BOX 750  
ATTN: TAX DEPT  
NASHVILLE TN 37202-0750  
US

2. Principal Place of Business

103 Powell Court, Suite 200

Brentwood, TN 37027

3. Mailing Address

103 Powell Court, Suite 200

Brentwood, TN 37027

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

62-1106159

Applied For

Not Applicable

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  
SUITE 105  
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, 2000 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	<input checked="" type="checkbox"/> Delete
NAME	BLACKWOOD, DORA A	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	DENSON, DAVID L	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN 37203	
TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	MOORE, A. BRUCE	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN 37203	
TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	JOHNSON, R. M	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	DVPS	<input checked="" type="checkbox"/> Delete
NAME	FRANCK, JOHN M	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	GRUBBS, RONALD LEE	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN 37203	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	See attached	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	000003214580	
STREET ADDRESS	-04/19/00--01062--001	
CITY-ST-ZIP	****341.25 ****150.00	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-8-00

615-372-8500

CR2E034 (1/97)

**Bartow Healthcare Partner, Inc.**  
103 Powell Court, Suite 200  
Brentwood, Tennessee 37027

Sole Shareholder: LifePoint Holdings 3, Inc.

**Officers:**

Scott L. Mercy  
James M. Fleetwood, Jr.  
Kenneth C. Donahey

Chairman and Chief Executive Officer  
President and Chief Operating Officer  
Senior Vice President and Chief Financial  
Officer  
Senior Vice President, General Counsel and  
Secretary

**Directors:**

Scott L. Mercy  
James M. Fleetwood, Jr.