

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY - 1 PM 3:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000001979 (3)**

1. Corporation Name

ORNDA OF SOUTH FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
SUITE 700 **SUITE 700**
3401 WEST END AVENUE **3401 WEST END AVENUE**
NASHVILLE TN 37203 **NASHVILLE TN 37203**

3. Date Incorporated or Qualified 3a. Date of Last Report
04/18/1994

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip 28. Zip 29. Country 30. Country

4. FEI Number Applied For
APPLIED FOR

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.039, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN, CHARLES N JR	12. NAME	Donald J. Amador
STREET ADDRESS	3401 WEST END AVENUE	13. STREET ADDRESS	3401 West End Ave. Ste. 700
CITY - ST - ZIP	NASHVILLE TN 37203	14. CITY - ST - ZIP	Nashville, TN 37203
TITLE	VC	21. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PITTS, KEITH B	22. NAME	
STREET ADDRESS	3401 WEST END AVENUE	23. STREET ADDRESS	
CITY - ST - ZIP	NASHVILLE TN 37203	24. CITY - ST - ZIP	
TITLE	S	31. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, JAMES H	32. NAME	Ronald P. Saltman
STREET ADDRESS	3401 WEST END AVENUE	33. STREET ADDRESS	3401 West End Ave. Ste. 700
CITY - ST - ZIP	NASHVILLE TN 37203	34. CITY - ST - ZIP	Nashville, TN 37203
TITLE	AS	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABBOTT, KAREN H	42. NAME	
STREET ADDRESS	3401 WEST END AVENUE	43. STREET ADDRESS	
CITY - ST - ZIP	NASHVILLE TN 37203	44. CITY - ST - ZIP	
TITLE	T	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TONNIES, RUSSELL F	52. NAME	
STREET ADDRESS	3401 WEST END AVENUE	53. STREET ADDRESS	
CITY - ST - ZIP	NASHVILLE TN 37203	54. CITY - ST - ZIP	
TITLE	VC	61. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANDT, STEPHEN	62. NAME	Bryan D. Burklow
STREET ADDRESS	3401 WEST END AVENUE	63. STREET ADDRESS	17308 NW 7th Ave. Ste. 204
CITY - ST - ZIP	NASHVILLE TN 37203	64. CITY - ST - ZIP	Miami, FL

14. I 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)(b), Florida Statutes. I further certify that the information submitted 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: *Karen H. Abbott* *Karen H. Abbott* 4/20/95 615-383-8599