

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000005604

1. Entity Name

BHC ST. JOHN'S RIVER HOSPITAL, INC.

FILED

May 26, 2000 8:00 am
Secretary of State

05-26-2000 90066 009 ***150.00

Principal Place of Business

Mailing Address

102 WOODMONT BLVD
STE 800
NASHVILLE TN 37205
US

102 WOODMONT BLVD
STE 800
NASHVILLE TN 37205-2221
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 62-1658514

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 PD
NAME STACK, EDWARD A
STREET ADDRESS 102 WOODMONT BLVD, SUITE 500
CITY-ST-ZIP NASHVILLE TN 37205 ☐ Delete

TITLE STD
NAME William P. Barnes
STREET ADDRESS 102 Woodmont Blvd., STE 800
CITY-ST-ZIP Nashville, TN 37205 ☐ Change ☒ Addition

TITLE STD
NAME DAVIS, MICHAEL E
STREET ADDRESS 102 WOODMONT BLVD, SUITE 500
CITY-ST-ZIP NASHVILLE TN 37205 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME WESTRICH, VERNON
STREET ADDRESS 121 WOODMRT BLVD STE 500
CITY-ST-ZIP NASHVILLE TN 37205 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME PRUITT, PAUL
STREET ADDRESS 102 WOODMONT BLVD STE 800
CITY-ST-ZIP NASHVILLE FL 37205 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: William P. Barnes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00 (615) 345-3316
Date Daytime Phone #

CR 034 (9/99)