

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2002 8:00 am**  
**Secretary of State**

05-15-2002 90036 038 \*\*\*150.00

0504272 AT

**DOCUMENT # F96000005604**

1. Entity Name

**BHC ST. JOHN'S RIVER HOSPITAL, INC.**

Principal Place of Business

**102 WOODMONT BLVD  
 STE 800  
 NASHVILLE TN 37205  
 US**

Mailing Address

**102 WOODMONT BLVD  
 STE 800  
 NASHVILLE TN 37205  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**62-1658514**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE

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, 2002 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 ☐ Delete  
 NAME **PD**  
 STREET ADDRESS **WESTRICH, VERNON S**  
 CITY-STATE-ZIP **102 WOODMONT BLVD, STE 800  
 NASHVILLE TN 37205**

TITLE ☐ Change ☒ Addition  
 NAME **V Kenneth R. Delk**  
 STREET ADDRESS **102 Woodmont Blvd, Ste 800**  
 CITY-STATE-ZIP **Nashville, TN 37205**

TITLE ☐ Delete  
 NAME **VTD**  
 STREET ADDRESS **BARNES, WILLIAM P**  
 CITY-STATE-ZIP **102 WOODMONT BLVD, STE 800  
 NASHVILLE TN 37205**

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

TITLE ☒ Delete  
 NAME **V**  
 STREET ADDRESS **WESTRICH, VERNON**  
 CITY-STATE-ZIP **121 WOODMONT BLVD STE 500  
 NASHVILLE TN 37205**

TITLE ☐ Change ☐ Addition  
 NAME **duplicated name**  
 STREET ADDRESS **(see President)**  
 CITY-STATE-ZIP

TITLE ☒ Delete  
 NAME **V**  
 STREET ADDRESS **COOPER, MARGARET JO**  
 CITY-STATE-ZIP **102 WOODMONT BLVD STE 800  
 NASHVILLE FL 37205**

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

TITLE ☒ Delete  
 NAME **V**  
 STREET ADDRESS **SCHNUCK, JAMES N**  
 CITY-STATE-ZIP **102 WOODMONT BLVD, STE 800  
 NASHVILLE TN 37205**

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

TITLE ☐ Delete  
 NAME **VS**  
 STREET ADDRESS **PETROVICH, STEPHEN C**  
 CITY-STATE-ZIP **102 WOODMONT BLVD, STE 800  
 NASHVILLE TN 37205**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-STATE-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:

*William P. Barnes* **William P. Barnes** 4/8/02 (615) 345-3316

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

ATTACHMENT

BHC ST. JOHNS RIVER HOSPITAL, INC.  
OFFICERS AND DIRECTORS  
CORPORATION NUMBER F96000005604

791811

**OFFICERS:**

Vernon S. Westrich  
William P. Barnes  
Stephen C. Petrovich  
Kenneth R. Delk

President  
Senior Vice President and Treasurer  
Senior Vice President and Secretary  
Vice President

The address for the above officers is:

102 Woodmont Blvd., Suite 800, Nashville, TN 37205

**DIRECTORS:**

William P. Barnes  
Vernon S. Westrich

The address for the above directors is:

102 Woodmont Blvd., Suite 800, Nashville, TN 37205