

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000005605

1. Entity Name

BHC FORT LAUDERDALE HOSPITAL, INC.

FILED
May 07, 2001 8:00 am
Secretary of State

05-07-2001 90016 023 ***150.00

545128



DO NOT WRITE IN THIS SPACE

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 Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 62-1658530	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STACK, EDWARD A 102 WOODMONT BLVD, SUITE 500 NASHVILLE TN 37205 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS BARNES, WILLIAM P 102 WOODMONT BLVD. SUITE 800 NASHVILLE TN 37205 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WESTRICH, VERNON S 102 WOODMONT BLVD. SUITE 800 NASHVILLE TN 37205 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 **William P. Barnes** 4/26/01 (615) 345-3316
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Document#
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BHC FORT LAUDERDALE HOSPITAL, INC.
OFFICERS AND DIRECTORS
FLORIDA DOCUMENT # F96000005605

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TITLE:	NAME:	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	Vernon S. Westrich	102 Woodmont Blvd., STE 800	Nashville, TN 37205	X	
VTD	William P. Barnes	102 Woodmont Blvd., STE 800	Nashville, TN 37205	X	
VS	Stephen C. Petrovich	102 Woodmont Blvd., STE 800	Nashville, TN 37205		X
V	Margaret Jo Cooper	102 Woodmont Blvd., STE 800	Nashville, TN 37205		X
V	James N. Schnuck	102 Woodmont Blvd., STE 800	Nashville, TN 37205		X