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Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90045 025 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F98000000455

1. Corporation Name

VENTURES HEALTHCARE OF GAINESVILLE, INC.

Principal Place of Business

**3401 WEST END AVENUE, STE 500
NASHVILLE TN 37203**

Mailing Address

**3401 WEST END AVENUE, STE 500
NASHVILLE TN 37203**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/26/1998

4. FEI Number

APPLIED FOR 62-1724586

Applied For

Not Applicable

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NRAI SERVICES, INC.
526 E PARK AVENUE
TALLAHASSEE FL 32301**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **CAMPBELL, H N**
STREET ADDRESS **3401 WEST END AVE, STE 500**
CITY-ST-ZIP **NASHVILLE TN**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **VSTD** ☐ DELETE
NAME **EDMONDS, JOHN C**
STREET ADDRESS **3401 WEST END AVE, STE 500**
CITY-ST-ZIP **NASHVILLE TN**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

615/383-0376

CR2E034 (11/98)

192738-90045-28
F98000000455

Fed. ID # 62-1724586

Document Number #F98000000455

**VENTURES HEALTHCARE OF GAINESVILLE, INC.
BOARD OF DIRECTORS**

H. Neil Campbell
3401 West End Avenue, Suite 500
Nashville, TN 37203

William J Ballard
3401 West End Avenue, Suite 500
Nashville, TN 37203

Alfred J. Smith
3401 West End Avenue, Suite 500
Nashville, TN 37203

Donald B. Whitfield
3401 West End Avenue, Suite 500
Nashville, TN 37203

OFFICERS

William J Ballard, Chairman
3401 West End Avenue, Suite 500
Nashville, TN 37203

H. Neil Campbell, President
3401 West End Avenue, Suite 500
Nashville, TN 37203

Alfred J. Smith, Senior Vice President
3401 West End Avenue, Suite 500
Nashville, TN 37203

Donald B. Whitfield, Treasurer
3401 West End Avenue, Suite 500
Nashville, TN 37203

John Edmunds, Secretary
3401 West End Avenue, Suite 500
Nashville, TN 37203