

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2002 8:00 am**  
**Secretary of State**

05-01-2002 91617 018 \*\*\*150.00

**DOCUMENT # F99000001978**

1. Entity Name

**MEDICAL MANAGEMENT PROFESSIONALS OF TENNESSEE, I  
 NC.**

Principal Place of Business

**5959 SHALLOWFORD ROAD, SUITE 511  
 CHATTANOOGA TN 37421**

Mailing Address

**5959 SHALLOWFORD ROAD, SUITE 511  
 CHATTANOOGA TN 37421**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**34-1878476**

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

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

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 **V** ☐ Delete  
 NAME **GONTAREK, ROBERT E**  
 STREET ADDRESS **5959 SHALLOWFORD ROAD STE 511**  
 CITY-ST-ZIP **CHATTANOOGA TN 37421**

TITLE ☐ Change ☐ Addition  
 NAME **\*\*SEE ATTACHED\*\***  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **S** ☒ Delete  
 NAME **RUTIGLIANO, BARBARA A**  
 STREET ADDRESS **6840 ROCKSIDE WOODS BLVD., SUITE 330**  
 CITY-ST-ZIP **CLEVELAND OH 44131**

TITLE **S** ☐ Change ☒ Addition  
 NAME **Michael W. Gleespen**  
 STREET ADDRESS **6480 Rockside Woods Blvd., Suite 330**  
 CITY-ST-ZIP **Cleveland, OH 44131**

TITLE **AT** ☐ Delete  
 NAME **YOUNG, FELICIA R**  
 STREET ADDRESS **6840 ROCKSIDE WOODS BLVD., SUITE 330**  
 CITY-ST-ZIP **CLEVELAND OH 44131**

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

TITLE **V** ☒ Delete  
 NAME **WOLFE, DENNIS K**  
 STREET ADDRESS **5959 SHALLOWFORD ROAD, SUITE 511**  
 CITY-ST-ZIP **CHATTANOOGA TN 37421**

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

TITLE **V** ☐ Delete  
 NAME **BUSH, J. DOUGLAS JR.**  
 STREET ADDRESS **5959 SHALLOWFORD ROAD SUITE 511**  
 CITY-ST-ZIP **CHATTANOOGA TN 37421**

TITLE **P** ☒ Change ☐ Addition  
 NAME **Douglas J. Bush, Jr.**  
 STREET ADDRESS **5959 Shallowford Rd., Suite 511**  
 CITY-ST-ZIP **Chattanooga, TN 37421**

TITLE **V** ☐ Delete  
 NAME **HULSEY, G DARRELL**  
 STREET ADDRESS **5959 SHALLOWFORD ROAD SUITE 511**  
 CITY-ST-ZIP **CHATTANOOGA TN 37421**

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

**REQUIRED**

**Michael W. Gleespen**

**4/1702**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (9/01)

Medical Management Professionals, Inc.

Officers & Directors

J. Douglas Bush, Jr.  
President  
5959 Shallowford Road, Suite 511  
Chattanooga, TN 37421

Jerome P. Grisko, Jr.  
Executive Vice President and  
6480 Rockside Woods Blvd., Suite 330  
Cleveland, OH 44131

William D. Stone  
Vice President  
5959 Shallowford Road, Suite 511  
Chattanooga, TN 37421

G. Darrell Hulsey  
Vice President  
320 Nancy Lynn Lane, Suite 7-C  
Knoxville, TN 37919

S. Mark Talley  
Vice President  
129 Broadmoor Lane  
Birmingham, AL 35007

David Vinson  
Vice President  
1805 Station Drive  
Prattville, AL 36066

Robert E. Gontarek  
Vice President  
4545 Tuscany Drive  
Plano, TX 75093

Kevin Sheperd  
Vice President  
3415 Greystone, Suite 307  
Auston, TX 78731

Daniel W. Simile, Jr.  
Vice President  
2929 Kenny Road, Suite 160  
Columbus, OH 43221

Greg Thomson  
Vice President  
5979 Vineland Road, Suite 315  
Orlando, FL 32819

David S. Azzolina  
Treasurer  
6480 Rockside Woods Blvd., Suite 330  
Cleveland, OH 44131

Felicia P. Young  
Assistant Treasurer  
6480 Rockside Woods Blvd., Suite 330  
Cleveland, OH 44131

Michael W. Gleespen  
Secretary  
6480 Rockside Woods Blvd., Suite 330  
Cleveland, OH 44131

Directors:

Jerome P. Grisko, Jr.  
Sole Director  
6480 Rockside Woods Blvd., Suite 330  
Cleveland, OH 44131