

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F99000002987**

1. Entity Name

TOTAL EMED OF TENNESSEE, INC.**FILED****Apr 19, 2001 8:00 am**
Secretary of State

04-19-2001 90088 011 ***158.75

Principal Place of Business

Mailing Address

720 COOL SPRINGS BLVD.**720 COOL SPRINGS BLVD.****SUITE 200****SUITE 200****FRANKLIN TN 37067****FRANKLIN TN 37067****C0049440**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **62-1731371**

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

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
REHM, RICHARD D M.D. ☒ Delete
720 COOL SPRINGS BLVD., SUITE 200
FRANKLIN TN 37067TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President ☐ Change ☒ Addition
David Noffenbeier
20500 NW Evergreen Pkwy
Hillsboro, OR 97124TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD ☒ Delete
MACDONALD, TED S
720 COOL SPRINGS BLVD., SUITE 200
FRANKLIN TN 37067TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary ☐ Change ☒ Addition
Mark E. Boulding
224 West 30th Street
New York, NY 10001TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP ☒ Delete
MACDONALD, TED
5301 VIRGINIA WAY, SUITE 250
BRENTWOOD TN 37207TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)