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PROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # **H46903**

1. Corporation Name
HEALTH FIRST NETWORK, INC.

Principal Place of Business	Mailing Address
~~4106 AIRPORT BLVD.~~	5020 COMMERCE PKW CIRCLE
5020 COMMERCE PK CIRCLE	PENSACOLA FL 32505
PENSACOLA FL 32505	US
US	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 03/12/1985

4. FEI Number: 59-2521606 ☐ 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
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

9. Name and Address of Current Registered Agent

PARKER, G. RONALD
5020 COMMERCE PARK CIRCLE
PENSACOLA FL 32505

10. Name and Address of New Registered Agent

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 G. Ronald PARKER 3/30/99
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	D	☐ DELETE	1.1 TITLE	D	☐ Change ☒ Addition
NAME	HERRON, WARREN		1.2 NAME	Turner, David, M.D.	
STREET ADDRESS	1720 NORTH E STREET		1.3 STREET ADDRESS	5120 Bayou Blvd, #1	
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY-ST-ZIP	Pensacola, FL 32503	
TITLE	D	☒ DELETE	2.1 TITLE	D	☒ Change ☐ Addition
NAME	TAN, THOMAS		2.2 NAME	Tan, Thomas, M.D.	
STREET ADDRESS	135C		2.3 STREET ADDRESS	1717 North "E" Street #231	
CITY-ST-ZIP	PENSACOLA FL		2.4 CITY-ST-ZIP	Pensacola, FL 32501	
TITLE	D	☐ DELETE	3.1 TITLE	D	☐ Change ☒ Addition
NAME	IRVIN, E C		3.2 NAME	Fleischhauer, Franklin, M.D.	
STREET ADDRESS	4501 NORTH DAVIS HWY, #A		3.3 STREET ADDRESS	5147 North 9th Ave., #401	
CITY-ST-ZIP	PENSACOLA FL		3.4 CITY-ST-ZIP	Pensacola, FL 32504	
TITLE	D	☐ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME	ZIMMERN, WILLIAM		4.2 NAME	Whibbs, William, M.D.	
STREET ADDRESS	2896 GULF BREEZE PKWY		4.3 STREET ADDRESS	6160 North Davis Hwy, #12	
CITY-ST-ZIP	GULF BREEZE FL		4.4 CITY-ST-ZIP	Pensacola, FL 32503	
TITLE	D	☒ DELETE	5.1 TITLE	D	☒ Change ☐ Addition
NAME	MCLEON, PAUL		5.2 NAME	McLeod, Paul	
STREET ADDRESS	1613 BERRYHILL ROAD		5.3 STREET ADDRESS	5020 Commerce Park Circle	
CITY-ST-ZIP	MILTON FL		5.4 CITY-ST-ZIP	Pensacola, FL 32505	
TITLE	D	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	LAMPONE, THOMAS		6.2 NAME	Cameron, Robert, M.D.	
STREET ADDRESS	1717 N E STREET, 208		6.3 STREET ADDRESS	4541 North Davis,Hwy, #A	
CITY-ST-ZIP	PENSACOLA FL		6.4 CITY-ST-ZIP	Pensacola, FL 32503	

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 G. Ronald PARKER 3/30/99 484-8200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)