

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #458910
1. Corporation Name Rivendell of Bay County, Inc.

Principal Place of Business: 1940 Harrison Avenue, Panama City, FL 32405
Mailing Address: Children's Comprehensive Services, Inc., 3401 West End Avenue, Ste 500, Nashville, TN 37203

3. Date Incorporated or Qualified: 05/23/1985
3a. Date of Last Report: 05/20/96
4. FEI Number: 59-2810347
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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 1940 Harrison Avenue
22 Suite, Apt. #, etc.
23 City & State: 22 Nashville, TN 37203
24 Zip: 25 Country
26 3401 West End Avenue
27 Suite, Apt. #, etc.: 27 Suite 500
28 City & State: 28 Nashville, TN 37203
29 Zip: 30 Country

9. Name and Address of Current Registered Agent
Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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: _____ (NOTE: Registered Agent signature required when re-instating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
	See attached			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	See attached			
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		000002264610--3		
		-08/12/97--01059--003		
		***330.00	***165.00	
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

J. Alan
8/7/97

14. I do 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

SIGNATURE: *John C. Edmunds* John C. Edmunds, Secretary 7/24/97 615-383-0376
Date: 7/24/97 Daytime Phone #: 615-383-0376

CR2E034 (9/96)

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Rivendell of bay County, Inc.
FEI # 59-2810347

Identification # H58910 (1)

Rivendell of Bay County

BOARD OF DIRECTORS

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

Bill Vickers
3401 West End Avenue, Suite 500
Nashville, TN 37203

OFFICERS

H. Neil Campbell, President / Chief Executive Officer
3401 West End Avenue, Suite 500
Nashville, TN 37203

Bill R. Vickers, Senior Vice President/Chief Operating Officer
3401 West End Avenue, Suite 500
Nashville, TN 37203

John C. Edmunds, Vice President/Secretary
3401 West End Avenue, suite 500
Nashville, TN 37203



3401 WEST END AVENUE
SUITE 500
NASHVILLE, TN 37203
TELEPHONE: 615/ 383-0376
FACSIMILE: 615/ 269-7525

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July 29, 1997

Mr. Dave Mann
Director of Corporations Division
Division of Corporations
Annual Reports Section
P. O. Box 1500
Tallahassee, FL 32302

Re: Rivendell of Bay County, Inc.
FEI #59-2810347

Vendell Healthcare, Inc.
FEI #62-1405890

Dear Mr. Mann:

Enclosed are the Annual Corporation Reports for 1997 for Rivendell of Bay County and Vendell Healthcare, Inc. Since we did not receive the forms this year, nor the 2nd notice from your office, we are requesting a waiver of the late penalty fee. As per my conversation with you on July 16, 1997, the enclosed checks are \$165.00 per each entity.

Thank you for your help in this matter.

Sincerely,

Ann Caste

Ann Caste

Enclosures