FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 20 AM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J28699 (3)

1. Corporation Name
PHYSICIAN SERVICES OF PALM BEACH COUNTY, INC. .

Principal Place of Business	Mailing Address
4525 HARDING ROAD P.O. BOX 24350 NASHVILLE TN 37202-1350	4525 HARDING ROAD P.O. BOX 24350 NASHVILLE TN 37202-1350

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/14/1986
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / Country — 30

4. FEI Number: 62-1297331 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	11 TITLE	☐ Change ☐ Addition
NAME	FRANCIS, RICHARD E JR.	12 NAME	
STREET ADDRESS	4525 HARDING ROAD	13 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN	14 CITY-ST-ZIP	
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	DONAHEY, KENNETH	22 NAME	
STREET ADDRESS	4525 HARDING ROAD	23 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN	24 CITY-ST-ZIP	
TITLE	VTD	31 TITLE	☐ Change ☐ Addition
NAME	DAVIS, GLENN D	32 NAME	
STREET ADDRESS	4525 HARDING ROAD	33 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN	34 CITY-ST-ZIP	
TITLE	VTD	41 TITLE	☐ Change ☐ Addition
NAME	KOBAN, MICHAEL A JR.	42 NAME	
STREET ADDRESS	700 S PALAFOX ST 3A	43 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL	44 CITY-ST-ZIP	
TITLE	PD	51 TITLE	☐ Change ☐ Addition
NAME	CONNERY, JR., W. HUDSON	52 NAME	
STREET ADDRESS	4525 HARDING ROAD	53 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN	54 CITY-ST-ZIP	
TITLE	S	61 TITLE	☐ Change ☐ Addition
NAME	WHEELER, PHILIP D	62 NAME	
STREET ADDRESS	4525 HARDING ROAD	63 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN	64 CITY-ST-ZIP	

See attached list.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Philip D. Wheeler Philip D. Wheeler 4/12/95 615/298-6226
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CP

J28699

PHYSICIAN SERVICES OF PALM BEACH COUNTY, INC.

OFFICERS:

President:	W. Hudson Connery, Jr.
Vice-President:	Richard E. Francis, Jr.
Vice-President and Asst. Treasurer:	Michael A. Koban, Jr.
Vice-President:	Kenneth C. Donahey
Vice-President:	James M. Fleetwood, Jr.
Vice-President:	Herbert T. Williams
Vice-President:	R. Milton Johnson
Vice-President and Treasurer:	Glenn D. Davis
Secretary;	Philip D. Wheeler
Asst. Secretary:	Linn H. McCain, III
Asst. Secretary:	Michelle B. Rutta
Asst. Secretary:	Diane A. Sheffield
Asst. Secretary:	Donald Street
Asst. Secretary:	Julia A. Trottier

DIRECTORS:

Yolanda D. Chesley
Glenn D. Davis
R. Milton Johnson

ADDRESS

4525 Harding Road
Nashville, TN 37205