

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90329 029 ***150.00

DOCUMENT # **J92436**

1. Entity Name
M & M OF OCALA, INC.



Principal Place of Business
**ONE PARK PLAZA
NASHVILLE TN 37203
US**

Mailing Address
**P.O. BOX 750
ATTN: TAX DEPT.
NASHVILLE TN 37202
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2889634**

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

**CT CORPORATION SYSTEM
1200 SOUTH ANE ISLAND RD.
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|----------------------------|---------------------------------|
| TITLE | AS | <input type="checkbox"/> Delete |
| NAME | BLACKWOOD, DORA A | |
| STREET ADDRESS | ONE PARK PLAZA | |
| CITY-ST-ZIP | NASHVILLE TN | |
| TITLE | DP | <input type="checkbox"/> Delete |
| NAME | MOORE, A. BRUCE | |
| STREET ADDRESS | ONE PARK PLAZA | |
| CITY-ST-ZIP | NASHVILLE TN | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | GRUBBS, RONALD LEE | |
| STREET ADDRESS | ONE PARK PLAZA | |
| CITY-ST-ZIP | NASHVILLE TN 37203 | |
| TITLE | DVP | <input type="checkbox"/> Delete |
| NAME | JOHNSON, R. M | |
| STREET ADDRESS | ONE PARK PLAZA | |
| CITY-ST-ZIP | NASHVILLE TN | |
| TITLE | DVSP | <input type="checkbox"/> Delete |
| NAME | FRANCK, JOHN M | |
| STREET ADDRESS | ONE PARK PLAZA | |
| CITY-ST-ZIP | NASHVILLE TN | |
| TITLE | AS | <input type="checkbox"/> Delete |
| NAME | DENSON, DAVID L | |
| STREET ADDRESS | ONE PARK PLAZA | |
| CITY-ST-ZIP | NASHVILLE TN | |

| | | |
|----------------|---------------------------|--|
| TITLE | VPAS | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | A. BRUCE MOORE, JR | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | R. MILTON JOHNSON | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | JOHN M. FRANK II | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | VPAS | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** *[Signature]* Date **4-22-03** 615/344-2162 Daytime Phone #

CR2E034 (10/02)

Attachment J92434
11030372

December 17, 2002

OFFICERS AND DIRECTORS
OF
M & M OF OCALA, INC.

| | | |
|------------------------------|--|---|
| * A. Bruce Moore, Jr. | President | One Park Plaza Nashville, TN 37203 |
| Robert A. Waterman | Senior Vice President | One Park Plaza Nashville, TN 37203 |
| David G. Anderson | Vice President and Treasurer | One Park Plaza Nashville, TN 37203 |
| Dora A. Blackwood | Vice President and Assistant Secretary | One Park Plaza Nashville, TN 37203 |
| Mike T. Bray | Vice President | One Park Plaza Nashville, TN 37203 |
| Steven E. Clifton | Vice President and Assistant Secretary | One Park Plaza Nashville, TN 37203 |
| David L. Denson | Vice President and Assistant Secretary | One Park Plaza Nashville, TN 37203 |
| * John M. Franck II | Vice President and Secretary | One Park Plaza Nashville, TN 37203 |
| V. Carl George | Vice President | One Park Plaza Nashville, TN 37203 |
| Tom C. Gormley | Vice President | One Park Plaza Nashville, TN 37203 |
| Ronald Lee Grubbs Jr. | Vice President | One Park Plaza Nashville, TN 37203 |
| * R. Milton Johnson | Vice President | One Park Plaza Nashville, TN 37203 |
| Dwight E. Long | Vice President | One Park Plaza Nashville, TN 37203 |
| Howard K. Patterson | Vice President | One Park Plaza Nashville, TN 37203 |
| Cathryn Long Sowers | Vice President | One Park Plaza Nashville, TN 37203 |
| Christopher Gentile | Assistant Secretary | One Park Plaza Nashville, TN 37203 |
| Joseph Stephen Haase | Assistant Secretary | One Park Plaza Nashville, TN 37203 |
| Dianne Johnson | Assistant Secretary | One Park Plaza Nashville, TN 37203 |

Attachment J92434 - 11030372

Lisa Marie Meister

Assistant Secretary

One Park Plaza
Nashville, TN 37203

Robert Jerome Nevens

Assistant Secretary

One Park Plaza
Nashville, TN 37203

Kenneth Kurt Roth

Assistant Secretary

One Park Plaza
Nashville, TN 37203

***Directors**
(Florida)

Persons employed in the capacity of Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Administrator and Assistant Administrator of facilities owned and/or operated by this Corporation, are hereby authorized to, subject to the Corporation's policies and procedures, (a) manage the facilities and all employees and agents of the Corporation at such facilities, and take such other acts as are necessary or appropriate for the proper functioning of the facilities, and (b) negotiate and enter into contracts and agreements necessary to the conduct of the day-to-day business of such facility, including, but not limited to, physician contracts, personal property leases, purchase agreements, cost reports, and similar documents (but specifically excluding any contracts or leases relating to real estate, except for leases to tenants in buildings owned by or leased to the Corporation entered into pursuant to the Corporation's policies and procedures), which with the advice of legal counsel, shall be deemed appropriate and advisable, and to execute and deliver Certificates of Resolution required in connection with such contracts and agreements.