

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K91741 (4)**
1. Corporation Name
SUN CITY HEALTH MANAGEMENT ASSOCIATES, INC.



Principal Place of Business **JAN 1 9** Mailing Address
**7000 W. PALMETTO PARK RD.
STE. #220
BOCA RATON FL 33433** **ATTN: TAX DEPT
P. O. BOX 15309
DURHAM NC 27704
US**

3. Date Incorporated or Qualified **05/30/1989** 3a. Date of Last Report **05/01/1995**
4. FEI Number **65-0136037** 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

2. Principal Place of Business 2a. Mailing Address
21. Suite, Apt. #, etc. 26. **ATTN: TAX DEPT**
22. City & State 27. **P O BOX 740026**
23. Zip Country 28. **LOUISVILLE, KY**
24. Zip Country 29. **40201-7426** 30. Zip Country

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 SOUTH 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. **200001817712
-05/13/96--01015--018**
84. City *****200.00** 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 officer 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 _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO LUCIBELLA, RICHARD 2400 E. COMMERCIAL BLVD STE. 315 FT. LAUDERDALE FL	<input type="checkbox"/> DELETE	1.1 TITLE P D SMITH, WAYNE 500 W MAIN LOUISVILLE KY 40201-1438 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add on
TITLE	D SOLNIK, MIKE 2400 E. COMMERCIAL BLVD STE 315 FT. LAUDERDALE FL	<input type="checkbox"/> DELETE	2.1 TITLE SrVP D CASH, W LARRY 500 W MAIN LOUISVILLE KY 40201-1438 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add on
TITLE	D RICHMAN, ANDREW 2400 E COMMERCIAL BLVD STE 315 FT LAUDERDALE FL	<input type="checkbox"/> DELETE	3.1 TITLE SrVP D COUGHLIN, KAREN A 500 W MAIN LOUISVILLE KY 40201-1438 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add on
TITLE	VS BIRCH, WALTER E 2255 GLADES RD., STE. 416 BOCA RATON FL	<input type="checkbox"/> DELETE	4.1 TITLE SrVP D GARMON, PHILIP B 500 W MAIN LOUISVILLE KY 40201-1438 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add on
TITLE	VTAS HARDISTER, SHAWN W 2400 E COMMERCIAL BLVD STE 315 FT LAUDERDALE FL	<input type="checkbox"/> DELETE	5.1 TITLE SrVP D LANKFORD, RONALD S., M.D. 500 W MAIN LOUISVILLE KY 40201-1438 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add on
TITLE	AS SNEDEKER, ANGELA M 2828 CROSDALE DR. DURHAM NC	<input type="checkbox"/> DELETE	6.1 TITLE VP BAUERNFEIND, GEORGE 500 W MAIN LOUISVILLE KY 40201-1438 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add on 5-1-96

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: *George Bauernfeind* VICE PRESIDENT-TAXES APR 20 1996 (502)580-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)