

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2007 8:00 am**  
**Secretary of State**

04-18-2007 90040 028 \*\*\*\*50.00

**DOCUMENT # M00000000770**

1. Entity Name

PUTNAM COMMUNITY MEDICAL CENTER, LLC



Principal Place of Business

103 POWELL COURT, SUITE 200  
BRENTWOOD, TN 37027

Mailing Address

103 POWELL COURT, SUITE 200  
BRENTWOOD, TN 37027

40068573



01052007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

62-1818453

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
NAME LIFEPOINT HOLDINGS 2, LLC  
STREET ADDRESS 103 POWELL COURT, SUITE 200  
CITY - ST - ZIP BRENTWOOD, TN 37027

TITLE ~~VPS~~ Sr VP  
NAME WILLIS, GARY D  
STREET ADDRESS 103 POWELL CT STE 200  
CITY - ST - ZIP BRENTWOOD, TN 37027

TITLE MGR  
NAME CULOTTA, MICHAEL J  
STREET ADDRESS 103 POWELL CT STE 200  
CITY - ST - ZIP BRENTWOOD, TN 37027

TITLE ~~MGR~~  
NAME ~~CARPENTER, WILLIAM F III~~  
STREET ADDRESS 103 POWELL CT STE 200  
CITY - ST - ZIP BRENTWOOD, TN 37027

TITLE SV  
NAME RAPPLEE, R. SCOTT  
STREET ADDRESS 103 POWELL CT STE 200  
CITY - ST - ZIP BRENTWOOD, TN 37027

TITLE ~~P~~ COO  
NAME GRACEY, WILLIAM M  
STREET ADDRESS 103 POWELL CT STE 200  
CITY - ST - ZIP BRENTWOOD, TN 37027

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

615. 372. 8500

ATTACHMENT

40068573  
# M00000000770

**PUTNAM COMMUNITY MEDICAL CENTER, LLC**

103 Powell Court, Suite 200  
Brentwood, Tennessee 37027  
FEIN: 62-1818453

**MANAGERS:**

Thomas M. Weiss, President  
Paul D. Gilbert, Senior Vice President  
R. Scott Raplee, Senior Vice President  
William E. Hoffman, Jr., Senior Vice President  
Thomas H. Butler, Jr., Vice President  
W. Vail Willis, Vice President  
Christopher J. Monte, Vice President  
Mary Kim E. Shipp, Secretary

**ADDRESS FOR ABOVE NAMED MANAGERS:**

103 Powell Court, Suite 200  
Brentwood, TN 37027