

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002201

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: BARTOW GENERAL PARTNER, LLC

**Current Principal Place of Business:**

103 POWELL COURT, SUITE 200  
BRENTWOOD, TN 37027

**New Principal Place of Business:**

**Current Mailing Address:**

103 POWELL COURT, SUITE 200  
BRENTWOOD, TN 37027

**New Mailing Address:**

FEI Number: 20-0526928

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LIFEPOINT HOLDINGS 2, , LLC  
Address: 103 POWELL COURT, SUITE 200  
City-St-Zip: BRENTWOOD, TN 37027

Title: MGR ( ) Delete  
Name: GILBERT, PAUL D  
Address: 103 POWELL COURT, SUITE 200  
City-St-Zip: BRENTWOOD, TN 37027

Title: MGR (X) Delete  
Name: CULOTTA, MICHAEL J  
Address: 103 POWELL COURT, SUITE 200  
City-St-Zip: BRENTWOOD, TN 37027

Title: MGR ( ) Delete  
Name: GRACEY, WILLIAM M  
Address: 103 POWELL COURT, SUITE 200  
City-St-Zip: BRENTWOOD, TN 37027

Title: MGR ( ) Delete  
Name: WILLIS, GARY D  
Address: 103 POWELL COURT, SUITE 200  
City-St-Zip: BRENTWOOD, TN 37027

Title: MGR (X) Delete  
Name: MONTE, CHRISTOPHER J  
Address: 103 POWELL COURT, SUITE 200  
City-St-Zip: BRENTWOOD, TN 37027

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: GARY WILLIS

MGR

04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date