

# 2001 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # M99000001747**

**1. Entity Name**  
**BARTOW MEMORIAL LIMITED PARTNER, LLC**

**FILED**

**01 MAR 21 PM 12:45**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**Principal Place of Business**  
**103 POWELL COURT  
SUITE 200  
BRENTWOOD TN 37027**

**Mailing Address**  
**103 POWELL COURT  
SUITE 200  
BRENTWOOD TN 37027**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number** **52-2199107**

Applied For  
Not Applicable

Zip

Country

Zip

Country

**5. Certificate of Status Desired** ☐ **\$5.00 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

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.**

**SIGNATURE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State**

**9. MANAGING MEMBERS/MEMBERS**

**10. ADDITIONS/CHANGES**

**TITLE** **MGR** ☐ Delete  
**NAME** **FLEETWOOD, JAMES M JR.**  
**STREET ADDRESS** **103 POWELL COURT**  
**CITY-ST-ZIP** **BRENTWOOD TN 37027**

☐ Change ☐ Addition  
**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** **MGR** ☐ Delete  
**NAME** **DONAHEY, KENNETH C**  
**STREET ADDRESS** **103 POWELL COURT**  
**CITY-ST-ZIP** **BRENTWOOD TN 37027**

☐ Change ☐ Addition  
**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** **MGR** ☐ Delete  
**NAME** **CARPENTER, WILLIAM F III**  
**STREET ADDRESS** **103 POWELL COURT**  
**CITY-ST-ZIP** **BRENTWOOD TN 37027**

☐ Change ☐ Addition  
**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** **MGR** ☐ Delete  
**NAME** **PANTOJA, ROBERTO G**  
**STREET ADDRESS** **103 POWELL COURT**  
**CITY-ST-ZIP** **BRENTWOOD TN 37027**

☐ Change ☐ Addition  
**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

☐ Change ☐ Addition  
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☐ Change ☐ Addition  
**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**11. 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 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:** **William F. Carpenter, III**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**03/12/2001**  
Date

**615-372-8500**  
Daytime Phone #

CR2E083 (11/00)

202

**BARTOW MEMORIAL LIMITED PARTNER, LLC**

103 Powell Court, Suite 200  
Brentwood, Tennessee 37027  
(615) 372-8500  
FEIN: 52-2199107

Sole Managing Member: Bartow Healthcare Partner, Inc.

**Appointed Managers:**

James M. Fleetwood, Jr.  
Kenneth C. Donahey  
William F. Carpenter III

Chairman, Chief Executive Officer and President  
Senior Vice President and Chief Financial Officer  
Senior Vice President, General Counsel and  
Secretary  
Vice President and Controller

Roberto G. Pantoja