2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
05-07-2002 90379 013 ****61.25

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1. Entity Name

ORLANDO REGIONAL HEALTH NETWORK, INC.

Principal Place of Business	Mailing Address
1414 KUHL AVE ORLANDO FL 32806 US	1414 KUHL AVE MP2 ORLANDO FL 32806 US

B0089937

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 89-3259553 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

EVANS, D L
225 E ROBINSON STREET
SUITE 600
ORLANDO FL 32801

7. Name and Address of New Registered Agent

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 $61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PINELL, MIKE 1414 KUHLE AVE ORLANDO FL	☐ Delete	DP PINELL, MIKE, M.D. 1414 KUHL AVE., MP71 ORLANDO, FL 32806	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BOZARD, JOHN 1414 KUHL AVE ORLANDO FL	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HILLENMYER, JOHN 1414 KUHL AVE ORLANDO FL	☐ Delete	DS HILLENMEYER, JOHN 1414 KUHL AVE., MP4 ORLANDO, FL 32806	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ELSWICK, SHANNON 1414 KUHL AVE ORLANDO FL 32806	☐ Delete	D ELSWICK, SHANNON 1414 KUHL AVE. MP1 ORLANDO, FL 32806	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOLDSTEIN, PAUL 1414 KUHL AVE ORLANDO FL 32806	☐ Delete	D GOLDSTEIN, PAUL 1414 KUHL AVE., MP2 ORLANDO, FL 32806	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	DT HODGES, KARL 1414 KUHL AVE., MP71 ORLANDO, FL 32806	☐ Change ☒ Addition

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 617, 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.

BDL 4/15/02

SIGNATURE: Karl Hodges REQUIRED 4-15-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)