

2000 UNIFORM BUSINESS REPORT (UBR)

10/4

DOCUMENT # N96000004814

1. Entity Name

FLORIDA MEMORIAL HEALTH NETWORK, INC.

FILED
00 OCT 12 AM 10:33

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

1061 MEDICAL CENTER DRIVE #313
308
ORANGE CITY FL 32763

1061 MEDICAL CENTER DRIVE #313
308
ORANGE CITY FL 32763



2. Principal Place of Business

3. Mailing Address

770 W. Granada Blvd.

770 W. Granada Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 210

Suite 210

City & State

City & State

Ormond Beach, FL

Ormond Beach, FL

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KENDRICK, CAMILLE E
1061 MEDICAL CENTER DRIVE
SUITE 308
ORANGE CITY FL 32763

Name Camille E. Kendrick
Florida Memorial Health Network
770 W. Granada Boulevard, Suite 210
Ormond Beach, FL 32174

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered:

SIGNATURE *Camille Kendrick*

DATE *October 2, 2000*

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

After September 13, 2000 min. will be \$236.25

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	See Attached
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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.

SIGNATURE: *SIGNATURE OF DIRECTOR*

Date 10.6.00

KE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2014

Title	D
Name	Don J. Alfonso, MD
Street Address	Ardent Family Care, PA 108 Flagler Plaza Drive
City-St-Zip	Palm Coast, FL 32137
Title	D
Name	Alfred L. Alson, MD
Street Address	P.O. Box 352018
City-St-Zip	Palm Coast, FL 32135-2018
Title	D
Name	Dennis T. Alter, MD
Street Address	9 Pine Cone Drive, Suite 104-A
City-St-Zip	Palm Coast, FL 32137
Title	C
Name	Grandy B. Barnard, III, MD -
Street Address	West Volusia Pediatrics, PA 809 N. Stone Street
City-St-Zip	DeLand, FL 32720
Title	D
Name	Jeffrey J. Bush, MD
Street Address	931 N. Spring Garden Avenue
City-St-Zip	DeLand, FL 32720-2560
Title	D
Name	Martin S. Feigenbaum, MD
Street Address	East Volusia Internal Medicine Associates 570 Memorial Circle
City-St-Zip	Ormond Beach, FL 32174
Title	D
Name	Philip P. Goodwin, MD
Street Address	Memorial Family Care – Palm Coast 309 Palm Coast Parkway, N.E.
City-St-Zip	Palm Coast, FL 32137
Title	D
Name	Sandford H. Kinne, III, DO
Street Address	1470 Oceanshore Boulevard
City-St-Zip	Ormond Beach, FL 32174
Title	D
Name	Stephen H. Levine, MD, FACS, PA
Street Address	873 Sterthaus Avenue, Suite 210
City-St-Zip	Ormond Beach, FL 32174
Title	D
Name	Andrew J. Randolph, MD, PA
Street Address	1015 N. Stone Street
City-St-Zip	DeLand, FL 32174

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Title Name Street Address City-St-Zip	D Jose J. Rosales, MD, PA 1061 Medical Center Drive, Suite 212 Orange City, FL 32763
Title Name Street Address City-St-Zip	D Mark S. Rubin, MD International Eye Associates, PA 550 Memorial Circle, Suite N Ormond Beach, FL 32174
Title Name Street Address City-St-Zip	D Michael J. Smigielski, MD Tri - County Orthopaedics, PA 1133 Saxon Boulevard Orange City, FL 32763
Title Name Street Address City-St-Zip	D Ajay K. Verma, MD 931 N. Spring Garden Avenue DeLand, FL 32720-2560
Title Name Street Address City-St-Zip	D Jerry L. Waikins, MD Memorial Health Center - Daytona Beach 1130 Beville Road Daytona Beach, FL 32114
Title Name Street Address City-St-Zip	D Mike Gentry Memorial Hospital - Ormond Beach 875 Sterthaus Avenue Ormond Beach, FL 32174
Title Name Street Address City-St-Zip	S Pat Dietrich Memorial Hospital - Ormond Beach 875 Sterthaus Avenue Ormond Beach, FL 32174
Title Name Street Address City-St-Zip	D Joseph Johnson Florida Hospital Fish Memorial 1055 Saxon Boulevard Orange City, FL 32763
Title Name Street Address City-St-Zip	D Clare Watson Memorial Hospital - Ormond Beach 875 Sterthaus Avenue Ormond Beach, FL 32174