

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000003941

FILED
Jun 17, 2003
Secretary of State

Entity Name: FLORIDA HEALTH SCIENCES CENTER, INC.

Current Principal Place of Business:

TAMPA GENERAL HOSPITAL
2 COLUMBIA DR., DAVIS ISLANDS
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

PO BOX 1289
TAMPA, FL 33601

New Mailing Address:

FEI Number: 59-3458145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEABERLIN, CARL R.N.
TAMPA GENERAL HOSPITAL
2 COLUMBIA DRIVE, DAVIS ISLANDS
TAMPA, FL 33606 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BERGER-MACKINNON, DOTTIE
Address: TAMPA GENERAL HOSPITAL RM A134
City-St-Zip: TAMPOA, FL 33606

Title: P () Delete
Name: HYTOFF, RONALD
Address: TAMPA GEN. HOSPITAL 2 COLOMBIA DR.
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: WRIGHT, CHARLES E MD
Address: 2 COLUMBIA DR., DAVIS ISLANDS
City-St-Zip: TAMPA, FL 33606

Title: DC () Delete
Name: ROSS, JEREMY P ESQ
Address: TAMPA GENERAL HOSP. RM A134
City-St-Zip: TAMPA, FL 33606

Title: DVC () Delete
Name: MULLIS, HAL JR ESQ
Address: TAMPA GENERAL HOSPITAL, RM A134
City-St-Zip: TAMPA, FL 33606

Title: DS () Delete
Name: OTERO, RAUL R MD
Address: HARBORSIDE MEDICAL TOWERS, STE 110
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: HYTOFF, RONALD A
Address: TAMPA GEN. HOSPITAL 2 COLUMBIA DR.
City-St-Zip: TAMPA, FL 33606

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 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD A. HYTOFF

P

06/17/2003

Electronic Signature of Signing Officer or Director

Date

JIM WARREN D
TAMPA GENERAL HOSPITAL RM A134
2 DAVIS ISLAND
TAMPA, FL 33606

STELLA F. THAYER D
TAMPA GENERAL HOSPITAL RM A134
2 DAVIS ISLAND
TAMPA, FL 33606

CYNTHIA D. MILLER D
TAMPA GENERAL HOSPITAL RM A134
2 DAVIS ISLAND
TAMPA, FL 33606

CURTIS LANE D
TAMPA GENERAL HOSPITAL RM A134
2 DAVIS ISLAND
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JAMES A. JIMENEZ D/T
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BOB EDWARDS D
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ROBERT M. DAUGHERTY, MD D
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RICHARD A. CORBETT D
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MARGARET CANCIO, MD D
TAMPA GENERAL HOSPITAL RM A134
2 DAVIS ISLAND
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