

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004250

1. Entity Name

TALLAHASSEE MEMORIAL HEALTH PARTNERS, INC.

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90296 010 ****61.25

Principal Place of Business

Mailing Address

C/O F. EDWARD CARNEY, M.D.
1300 MICCOSUKEE RD
TALLAHASSEE FL 32308

C/O F. EDWARD CARNEY, M.D.
1300 MICCOSUKEE RD
TALLAHASSEE FL 32308-5054

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3533299

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORE, E MURRAY
215 S MONROE ST, 2ND FL
TALLAHASSEE FL 32301

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	<input type="checkbox"/> Delete
SO	LAWHORN, THOMAS L MD	1300 MICCOSUKEE RD.	TALLAHASSEE FL 32308	<input type="checkbox"/>
PD	DEEB, LARRY C	1300 MICCOSUKEE RD.	TALLAHASSEE FL 32308	<input type="checkbox"/>
SD	CROOMS, JEFFREY W	1300 MICCOSUKEE RD.	TALLAHASSEE FL 32308	<input type="checkbox"/>
TD	GIUDICE, WILLIAM A	1300 MICCOSUKEE RD.	TALLAHASSEE FL 32308	<input type="checkbox"/>
D	ASHMORE, ROBERT E JR.	1300 MICCOSUKEE RD.	TALLAHASSEE FL 32308	<input type="checkbox"/>
D	BRETT, K. WILLIAM MD	1300 MICCOSUKEE RD.	TALLAHASSEE FL 32308	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

TALLAHASSEE MEMORIAL HEALTH PARTNERS, INC.

BOARD OF DIRECTORS

Attachment!
C0088281
#N98000004256

CD Thomas I. Lawhorn, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308

PD Larry C. Deeb, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308

SD Jeffrey W. Crooms, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308

TD William A. Giudice
1300 Miccosukee Rd.
Tallahassee, FL 32308

D Robert E. Ashmore, Jr., M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308

D K. William Brett, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308

D F. Edward Carney, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308

D Todd A. Patterson, D.O.
1300 Miccosukee Rd.
Tallahassee, FL 32308

D Jack W. MacDonald, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308

D Robert M. Snider, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308

D Barbara W. Williams, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308