

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004250

1. Entity Name

TALLAHASSEE MEMORIAL HEALTH PARTNERS, INC.

Principal Place of Business

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

Mailing Address

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

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

59-3533299

Applied For

Not Applicable

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

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

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

SIGNATURE:

SIGNATURE REQUIRED

William A Giudice

(850) 431-5238

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90048 036 ****61.25

C0020515



DO NOT WRITE IN THIS SPACE

0000800

CR2E037 (10/00)

Attachment
D#N9800000427
00001515

TALLAHASSEE MEMORIAL HEALTH PARTNERS, INC.
BOARD OF DIRECTORS

- | | | | |
|-----------|---|-----------|--|
| CD | Thomas I. Lawhorn, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308 | D. | Jack W. MacDonald, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308 |
| PD | Larry C. Deeb, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308 | D | Robert M. Snider, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308 |
| SD | Jeffrey W. Crooms, M.D.
1300 Miccosukee Rd.
Tallahassee, FL 32308 | D | Barbara W. Williams, 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 | | |