FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 03, 2001 8:00 am Secretary of State **DOCUMENT # P05729** MEDIVISION OF TAMPA, INC. 04-03-2001 90117 017 ***150.00 Mailing Address Principal Place of Business ONE PARK PLAZA P.O. BOX 750 NASHVILLE TN 37203 NASHVILLE TN 37202 C0041534 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 04-2842160 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Change Addition CR2E034 (10/00 TITLE ☐ Delete TITLE Greg Roth ONE Park Plaza FRANCK, JOHN M II NAME MARKE STREET ADDRESS STREET ADDRESS 1 PARK PLAZA CITY-ST-ZIP Nashville TN 37203 CITY-ST-7IP NASHVILLE TN 37203 **Addition** ☐ Change TITLE Delete TITLE R. Milton Johnson HINTON, JAMES D NAME NAME One Park Plaza STREET ADDRESS ONE PARK PLAZA STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Nashville TN 37203 NASHVILLE TN 37203 ☐ Change Addition TITLE ☐ Delete TITI F A. Bruce Moore, Jr. Drue Park Plaza GRUBBS, RONALD LEE NAME NAME STREET ADDRESS ONE PARK PLAZA STREET ADDRESS Nashuille TN 37203 CITY-ST-ZIP CITY-ST-7IP NASHVILLE TN 37203 TITLE Delete ☐ Change Addition TITLE David Denson NAME NAME One Par K Plaza STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Nashville TN 37203 ☐ Addition ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP T CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

David Denson SIGNATURE Assistant Secretary SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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