

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P11296** (1)
1. Corporation Name
NATIONAL HEALTHCARE OF WASHINGTON COUNTY, INC.



Principal Place of Business
**155 FRANKLIN ROAD
S 400
BRENTWOOD TN 37027
US**

Mailing Address
**155 FRANKLIN RD
S 400
BRENTWOOD TN 37027
US**

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29 30

3. Date Incorporated or Qualified **09/02/1986** 3a. Date of Last Report **03/08/1995**

4. FEI Number **59-2714705** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 **300001817863
-05/13/96--01018--043**
84 City *****200.00** 85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Speed or print name of registered agent and the date of filing

Signature of Registered Agent and the date of filing

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DSVP	WILBURN, TYREE G	155 FRANKLIN ROAD, #400	BRENTWOOD TN	☐
DVPT	MOFFETT, DEBORAH G	3707 FM 1980 WEST, #500	HOUSTON TX	☐
DVPC	BUFORD, T. M	3707 FM 1980 WEST, #500	HOUSTON TX	☐
P	CHANEY, E. T	3707 FM 1980 WEST, #500	HOUSTON TX	☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
VP	Agee, Paul T.	155 Franklin Road, Suite 400	Brentwood, TN 37027	☐	☒	☒
DSVPT	Moffett, Deborah G.	155 Franklin Road, Suite 400	Brentwood, TN 37027	☐	☒	☐
DVPC	Buford, T. Mark	155 Franklin Road, Suite 400	Brentwood, TN 37027	☐	☒	☐
P	Chaney, E. Thomas	155 Franklin Road, Suite 400	Brentwood, TN 37027	☐	☒	☐
S	Parsons, Linda K.	155 Franklin Road, Suite 400	Brentwood, TN 37027	☐	☐	☒
AS	Martin-Michels, Sara	155 Franklin Road, Suite 400	Brentwood, TN 37027	☐	☐	☒

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sara Martin-Michels
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96

615/377-4532

CR2E034 (12/95)