

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P20070 (9)

1. Corporation Name

DAVIS STOKES CHILTON COLLABORATIVE, P.C.



Principal Place of Business

530 26TH AVE. N.
NASHVILLE TN 37209

Mailing Address

530 26TH AVE. N.
NASHVILLE TN 37209

3. Date Incorporated or Qualified
07/15/1988

3a. Date of Last Report
04/07/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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25

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4. FEI Number

62-1247874

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

10. Name and Address of New Registered Agent

WEBSTER, BRIAN
WEWA ROUTE 75-3033
PANAMA CITY FL 32404

81 Name
Barry Oliver

82 Street Address (P.O. Box Number is Not Acceptable)
5300 Northwest 33rd Avenue

83 Suite 206

84 City
Ft. Lauderdale

FL 85 Zip Code
33309

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

Barry L. Oliver

Barry L. Oliver

2/26/96

Signature of agent or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE

President

☒ Change ☐ Addition

NAME
STOKES, WILLIE
STREET ADDRESS
5957 GREENBRIER RD
CITY-ST-ZIP
FRANKLIN TN

1.2 NAME

Willie O. Stokes

1.3 STREET ADDRESS

5800 Greenbrier Road

1.4 CITY-ST-ZIP

Franklin, TN 37064

TITLE ☐ DELETE

2.1 TITLE

Treasurer

☒ Change ☐ Addition

NAME
CHILTON, IRA A.
STREET ADDRESS
3506 BYRON AVE.
CITY-ST-ZIP
NASHVILLE TN

2.2 NAME

John W. Davis

2.3 STREET ADDRESS

211 Wildcreek Road

2.4 CITY-ST-ZIP

Shelbyville, TN 37160

TITLE ☐ DELETE

3.1 TITLE

Secretary

☒ Change ☐ Addition

NAME
DAVIS, JOHN W.
STREET ADDRESS
1045 FAIRFIELD PIKE
CITY-ST-ZIP
SHELBYVILLE TN

3.2 NAME

Ira A. Chilton

3.3 STREET ADDRESS

3506 Byron Avenue

3.4 CITY-ST-ZIP

Nashville, TN 37205

TITLE ☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY-ST-ZIP

4.4 CITY-ST-ZIP

TITLE

5.1 TITLE

☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-ST-ZIP

5.4 CITY-ST-ZIP

TITLE

6.1 TITLE

☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

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, corporation attachment with an address.

SIGNATURE:

Ira A. Chilton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ira A. Chilton Secretary

1/30/96

615-320-0001

Date

Daytime Phone #

CR2E034 (12/95)