

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

FILED
May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # P27781 (4)

1. Corporation Name

222 Partners, Inc.

Principal Place of Business Mailing Address
4400 Harding Road, Suite 500 same
Nashville, TN 37205

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	1/19/90	
22 City & State	27 City & State	4. FEI Number	Applied For
23 Zip	28 Zip	62-1291421	Not Applicable
24 Country	29 Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	30 Country		\$5.00 May Be Added to Fees
		6. Election Campaign Financing Trust Fund Contribution	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

CT Corporation. System
JAF Station
P.O. Box 1421
New York, NY 10116-1421

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
83
84 City Plantation FL 85 Zip Code 33324

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS N 12	
TITLE	P/D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ezell, Steven D.	1.2 NAME	
STREET ADDRESS	4400 Harding Rd. Suite 500	1.3 STREET ADDRESS	
CITY-ST-ZIP	Nashville, TN 37205	1.4 CITY-ST-ZIP	
TITLE	V/D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hartley, Michael A	2.2 NAME	
STREET ADDRESS	4400 Harding Rd. Suite 500	2.3 STREET ADDRESS	
CITY-ST-ZIP	Nashville, TN 37205	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lehning, Robert E.	3.2 NAME	
STREET ADDRESS	4400 Harding Rd. Suite 500	3.3 STREET ADDRESS	
CITY-ST-ZIP	Nashville, TN 37205	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ezell, W. Gerald	4.2 NAME	
STREET ADDRESS	4400 Harding Rd. Suite 500	4.3 STREET ADDRESS	
CITY-ST-ZIP	Nashville, TN 37205	4.4 CITY-ST-ZIP	
TITLE	S/T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hartley, Michael A	5.2 NAME	
STREET ADDRESS	4400 Harding Rd. Suite 500	5.3 STREET ADDRESS	
CITY-ST-ZIP	Nashville, TN 37205	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

500002165635
-05/05/97--01039--033
***200.00

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 in 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:

Steven D. Ezell 4-29-97 1:15 PM 10/12