**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

ISION OF CORPORATIONS

## **FILED** Jul 26, 1999 8:00 am Secretary of State

07-26-1999 90012 045 \*\*\*150.00

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	DOCUM 1. Corporation I		•				
	PHYCOR	OF WINTER HAVEN, INC.				* 3	595489 - 90012 - 45
	11110011	Of Whitelest I is the East of the Control			/	•	
	Principal Place	of Business	Mailing Address				
30 BURTON HILLS BLVD 30 BURTON HILLS BLVD							
	SUITE 500	27215	SUITE 500 NASHVILLE TN 37215			DO NOT W	VRITE IN THIS SPACE
NASHVILLE TN 37215 US			US			3. Date Incorporated or Qualif	fied
						09/12/1990	
_	2. Principal Pla	ce of Business	2a. Mailing Address	·		4. FEI Number	Applied For
1	21		26			62-1438144	Not Applicable \$8.75 Additional
	Suite, Apt. #		Suite, Apt. #, etc.  27 Suite 40	0		5. Certificate of Status Desire	d Fee Required
2	22 Suite		City & State		·· <del>···</del>	6. Election Campaign Financi	ng \$5.00 May Be
	City & State		28			Trust Fund Contribution	Added to Fees
•	Zip	Country	Zip	Country	,	8. This corporation owes the	current year
	24	25	29	30		Intangible Personal Proper	
L		9. Name and Address of Current	Registered Agent		1 11	10. Name and Address of Ne	w Registered Agent
	COB	PORATION SERVICE COMPANY		81			
		HAYS STREET		82	Street Ac	ddress (P.O. Box Number is Not Acc	eptable)
		AHASSEEE FL 32301		83			
						<u></u>	85 Zip Code
l				84	City		FL   85   Zip Code
ŀ	11. Pursuant i	to the provisions of sections 607.0502	and 607.1508, Florida Statut	tes, the above	-námed cor	poration submits this statement for th	ne purpose of changing its registered
l		to the provisions of sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligat				ation's board of directors, i neleby a	coapt the appointment as registered
١	SIGNATURE _						0.75
ŀ		Signature, typed or printed name of registered agent		NOTE: Registered	Agent signature	required when reinstating)  ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN 12
ŀ	12.	OFFICERS AND	DELETE	1.1 TITLE		CED/AS/D	Change Addition
ļ	TITLE NAME	HUTTS, JOSEPH C.	- Derete	1.2 NAME			
1	STREET ADDRESS 30 BURTON HILLS BLVD,340			1.3 STREE	TADDRESS		
l	CITY-ST-ZIP	NASHVILLE TN		1.4 CITY-5	T-ZIP		
ļ	TITLE	VD	DELETE	2.1 TITLE			Change Addition
ĺ	NAME	REEVES, DERRIL W.		2.2 NAME	1		
l	STREET ADDRESS	30 BURTON HILLS BLVD,340			TADDRESS		
l	CITY-ST-ZIP	NASHVILLE TN		2.4 CfTY-5		<u></u>	Change Addition
	TITLE	VD	<b>⊠</b> DELET <b>E</b>	3.1 TITLE 3.2 NAME	1		Change Addition
	NAME	WRIGHT, RICHARD D.			T ADDRESS		
	STREET ADDRESS	30 BURTON HILLS BLVD,340 NASHVILLE TN		3.4 CITY-5			·
	CITY-ST-ZIP TITLE	SD SD	DELETE	4.1 TITLE		P/cop/AS/D	Change Addition
	NAME	DENT, THOMPSON S.		4.2 NAME		17 77107 12	
	STREET ADDRESS	30 BURTON HILLS BLVD,340		4.3 STREE	T ADDRESS		
ļ	CITY-ST-ZIP	NASHVILLE TN		4.4 CITY-	ST-ZIP		
	TITLE	٧T	DELETE	5.1 TITLE			Change Addition
	NAME	CRAWFORD, JOHN K	***	5.2 NAME			
	STREET ADDRESS	30 BURTON HILLS BLVD STE	340		ET ADDRESS		
	CITY-ST-ZIP	NASHVILLE TN	<u> </u>	5.4 CITY- 6.1 TITLE			Change Addition
	TITLE	VP FOREHAND, CAROLYN N	DELETE	6.2 NAME			
	NAME	30 BURTON HILLS BLVD SUIT	F 500		ET ADDRESS		ملاماً ا
	I STREET ADDRESS I	CO DOINGIA MELO DEAD OUT	<b>■ ₹</b> ₹₹				

14. 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 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.

Monte S. Frankenfield Vice President, 7/

(615)665.9066



July 7, 1999

Florida Department of State Annual Reports Filings Division of Corporations P O Box 6327 Tallahassee, FL 32314

RE: Document # P30892 PhyCor of Winter Haven, Inc.

Dear Processing Agent:

As instructed in a phone conversation today with your office, I am enclosing the 1999 Corporate Annual Report and regular filing fee of \$150.00 for PhyCor of Winter Haven, Inc. since I did not receive notice of this report for this pre-existing entity prior to the second notice.

PhyCor, Inc. did receive and complete reports earlier in the year for two new entities. However, due to the number of clinics that we manage, we are unable to have preknowledge of which annual reports are due at what time without notification. Therefore, please accept the enclosed report and filing fee.

Please call me if you have questions or need further clarification at (615) 665-8164.

Sincerely,

Marlene K. Bartikoski

Marlen Kbarkoshi

Tax Analyst

Mkb

Enclosure

## PHYCOR OF WINTER HAVEN, INC.

595489-9002-45 P30892

## Directors:

Thompson S. Dent Joseph C. Hutts Derril W. Reeves

## Officers:

Joseph C. Hutts Chairman of the Board, Chief Executive Officer and

**Assistant Secretary** 

Derril W. Reeves Vice Chairman, Executive Vice President and Assistant

Secretary

Thompson S. Dent President, Chief Operating Officer and Assistant

Secretary

John K. Crawford Executive Vice President, Chief Financial Officer and

Assistant Secretary

Monte S. Frankenfield Vice President and Assistant Secretary

N. Carolyn Forehand Vice President, General Counsel and Secretary

Sam C. Bills, Jr. Vice President and Assistant Secretary

Fred Ewing Senior Vice President, Operations and Assistant

Secretary

Brandon Dyson Vice President and Assistant Secretary

Jon M. Sundock Vice President and Assistant Secretary

R. Douglas Mefford Vice President and Assistant Secretary

The business address for the above officers and directors is:

30 Burton Hills Boulevard, Suite 400 Nashville. TN 37215