

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

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

07-26-1999 90012 004 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P31366**

1. Corporation Name
PHYCOR OF JACKSONVILLE, INC.



Principal Place of Business
**30 BURTON HILLS BOULEVARD, SUITE 340
 NASHVILLE TN 37215**

Mailing Address
**30 BURTON HILLS BLVD.
 STE. 400
 NASHVILLE TN 37215
 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/18/1990

4. FEI Number
62-1442783

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 owes the current year Intangible Personal Property. Yes No

2. Principal Place of Business
 21 Suite, Apt. #, etc. **Suite 400**
 22 City & State
 23 Zip **25 US**

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

9. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	HUTTS, JOSEPH C.	
STREET ADDRESS	30 BURTON HILLS BLVD., SUITE 500	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	REEVES, DERRILL W.	
STREET ADDRESS	30 BURTON HILLS BLVD., SUITE 500	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	WRIGHT, RICHARD D.	
STREET ADDRESS	30 BURTON HILLS BLVD., #500	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	DENT, THOMPSON S.	
STREET ADDRESS	30 BURTON HILLS BLVD., SUITE 500	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	T	<input type="checkbox"/> DELETE
NAME	CRAWFORD, JOHN K	
STREET ADDRESS	30 BURTON HILL BLVD, STE 500	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	VPAS	<input type="checkbox"/> DELETE
NAME	FRANKENFIELD, MONTE	
STREET ADDRESS	30 BURTON HILLS BLVD STE 500	
CITY-ST-ZIP	NASHVILLE TN	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C/CEO/AS/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	30 Burton Hills Blvd., Ste 400	
1.4 CITY-ST-ZIP	Nashville, TN 37215	
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	30 Burton Hills Blvd., Ste. 400	
2.4 CITY-ST-ZIP	Nashville, TN 37215	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	P/COO/AS/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	30 Burton Hills Blvd., Ste. 400	
4.4 CITY-ST-ZIP	Nashville, TN 37215	
5.1 TITLE	VP/CFO/AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	30 Burton Hills Blvd. Ste. 400	
5.4 CITY-ST-ZIP	Nashville, TN 37215	
6.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Frankenfield, Monte S.	
6.3 STREET ADDRESS	30 Burton Hills Blvd. Ste 400	
6.4 CITY-ST-ZIP	Nashville TN 37215	

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.

SIGNATURE: **Monte S. Frankenfield** Vice President **7/8/99** (615) 465-9066

CR2E034 (5/99)

July 7, 1999

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

RE: Document # P31366
PhyCor of Jacksonville, 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 Jacksonville, 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 pre-knowledge 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

Marlene K. Bartikoski
Tax Analyst

Mkb

Enclosure

PHYCOR OF JACKSONVILLE, INC.

595448-90072-4

P31366

Directors:

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

Officers:

Joseph C. Hutts	Chairman, 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 Frankenfield	Vice President and Assistant Secretary
Sam C. Bills, Jr.	Vice President and Assistant Secretary
Oliver V. Rogers	Senior Vice President, Operations and Assistant Secretary
Henry E. Ross	Vice President, Operations and Assistant Secretary
Steven J. Priest	Vice President and Assistant Secretary
N. Carolyn Forehand	Vice President, General Counsel 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**