FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000043493 (1)

FILED Apr 29 1998 8:00am Secretary of State

COLUN	<i>i</i> ibia integrati	ED SERVICES,	INC.							
Principal Plac	e of Business		Mailing Address					KIT BIBBB KIKIT BIBIB	10100 IIII IDD1	
ONE PARK PLAZA PO BOX 750							}			
NASHVILLE T	N 37203	NASHVILLE TN 37202				20 1107 1117 1117				
			US				DO NOT WRITE IN 1	HIS SPACE		ı
			•				3. Date Incorporated or Qualified 05/21/1996			
2. Principal Place of Business			2a. Mailing Address			4. FEI Number		Applied For	ł	
21			26			62-1641030	-	Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				. \$8.76	Additional	ĺ	
22			27			5. Certificate of Status Desired		Required		
City & State			City & State				6. Election Campaign Financing \$5.00 May Be			
23			28				Trust Fund Contribution			
Zip			Zip Cou		atry		8. This corporation owes or has paid th			
24	25		29	30			Personal Property Tax due June 30.		□ No	
		Iress of Current Re	~	<u>-</u>	B1 Na		10. Name and Address of New Registe	ered Agent		1
	E PRENTICE-HALL	CORPORATION S	SYSTEM, INC.	\	B1 Na	me	,			
	01 HAYS STREET	204	82			eet Addre	ss (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32301				<u> </u>	83					i
									اعان ا	
				[1	B4 Cit	У		FL 85 Zir		ĺ
11. Pursuant office or r	to the provisions of S registered agent, or b	ections 607.0502 an oth, in the State of F	d 607.1508, Florida Stati lorida, Such change was	utes, the ab authorized	ove-nar by the	ned corpo corporatio	ration submits this statement for the purpo n's board of d irectors. I hereby accept the		gistered gistered	
	ım familiar with, and a	ccept the obligation	s of, Section 607.0505, f	lorida Statu	ites.				į	l
SIGNATURE	Signature typed or printed n	ame of registered agent and	Ltdle d applicable (NO	D1E Registered	Agent sign	ature required	when reinstaling) De	ATE		_
12.		OFFICERS AND DI		13.		^ ^	_ ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	PRS IN 12	2
TITLE	-9∀9		DELETE	1.1 [1][LΕ	114	>	Change	Addition	5
NAME	-BRAUN, STEPH		• •	1.2 NA	ΝE	BI	ackwood. Dora:	人 .	, ,	3
STREET ADDRESS	ONE PARK PLA	ZA		1.3 STR	EET ADDRI	ss			į	Š
CITY-ST-ZIP	NASHVILLE TN			1.4 C/T	Y-ST-ZIP					Ş
TITLE	DVT	MCTI A	☐ DELET e	2.1 TiTL	. £		SVAT	Change	☐ Addition	۲
NAME	DONAHEY, KEN			2.2 NAM	N E	-		ŧ	ļ	
STREET ADDRESS	ONE PARK PLA	ZA		2.3 STR	EET ADDRI	ss [j	
CITY-ST-ZIP	NASHVILLE TN	·	T sciere		Y-ST-ZIP					
TITLE	ELTON, ROSAL	VAL C	☐ DELETE	31 THL		- 1		∟ Change	☐ Addition	i
NAME	ONE PARK PLA			3.2 NAA						l
STREET ADORESS	NASHVILLE TN	- ^			EET ADDRE	22			-	i
CITY-ST-ZIP	PAGITICEE III		DELETE	3.4. CH 4.1 THE	Y-ST-ZIP	1	10c	Change	Addition	
TITLE NAME	FRANCK, JOHN	MII	been	4. 2 NA	-		11.3	Me original		
STREET ADDRESS	ONE PARK PLA			1	ivie Eet addre	·ce			}	1
CITY-ST-ZIP	NASHVILLE TN	_,			Y-ST-ZIP	.55				
TITLE			DELETE	5.1 TITL				Change	Addition	
NAME				5.2 NAM		1				l
STREET ADDRESS					EET ADDRE	ss				
CITY-ST-ZIP					Y - ST - <i>Z</i> IP					i
TITLE			DELETE	6.1 717				Change	Addition	ĺ
NAME				6.2 NAM				Ť		ļ
STREET ADDRESS					eet addre	ss				
CITY-ST-ZIP					Y - ST - Z IP					
14. I hereby of	certify that the information this annual report	tion supplied with the or supplemental and	is filing does not qualify	for the exer	nption s	tated in S	ection 119.07(3)(i), Florida Statutes. I furth shall have the same legal effect as if made	er certify that th	e information hat I am an	

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 a officer or director of the comporation 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 charged, or on an attachment with an address.