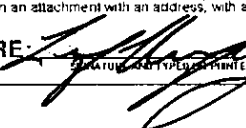


FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90180 043 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000104670					
1. Entity Name RENEX MANAGEMENT SERVICES, INC.					
Principal Place of Business 230 GREAT CIRCLE ROAD, SUITE 218 NASHVILLE, TN 37228-1735 US			Mailing Address P.O. BOX 280907 NASHVILLE, TN 37228-0907 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0837198	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 626 EAST PARK AVENUE TALLAHASSEE, FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent's signature required when separating.) DATE _____					
FILE NOW!!! FEES \$150.00 After May 1, 2003 Fee will be \$50.00 Make Check Payable to: Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TANNENBAUM, JEROME S 230 GREAT CIRCLE ROAD, SUITE 218 NASHVILLE, TN 372281735	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HYMES, JEFFREY M.D. 230 GREAT CIRCLE ROAD, SUITE 218 NASHVILLE, TN 372281735	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HARRISON, MILTON S 230 GREAT CIRCLE ROAD, SUITE 218 NASHVILLE, TN 372281735	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS MURPHY, LEIF M 230 GREAT CIRCLE ROAD, SUITE 218 NASHVILLE, TN 372281735	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Leif M. Murphy		4/2/03 615/777-8042	
SIGNATURE OF OFFICER OR DIRECTOR OF SIGNING OFFICER OR DIRECTOR					

90073899



☐ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)