

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathers
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-06/09/95--01029--017
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE.

DOCUMENT # V 62734
1. Corporation Name **SURGICARE OF KISSIMMEE, INC.**

Principal Place of Business Mailing Address

2. Date Incorporated or Qualified 3a. Date of Last Report

21. Principal Place of Business ONE PARK PLAZA	2a. Mailing Address PO BOX 570	4. FEI Number 75-2407305	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc. ATTN: TAX DEPT	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State NASHVILLE TN	City & State NASHVILLE TN	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 37203	Country	7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: <input type="checkbox"/> Yes <input type="checkbox"/> No	

8. Name and Address of Current Registered Agent <i>The Prentice Hall Corporation System Inc 201 Hay Street, Suite 105 Tallahassee FL 32301</i>	10. Name and Address of New Registered Agent
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
	85 Zip Code FL

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 _____ DATE _____
Signature typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	ONE PARK PLAZA
CITY - ST - ZIP		1.4 CITY - ST - ZIP	NASHVILLE TN 37203
TITLE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	ONE PARK PLAZA
CITY - ST - ZIP		2.4 CITY - ST - ZIP	NASHVILLE TN 37203
TITLE		3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	ONE PARK PLAZA
CITY - ST - ZIP		3.4 CITY - ST - ZIP	NASHVILLE TN 37203
TITLE		4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	ONE PARK PLAZA
CITY - ST - ZIP		4.4 CITY - ST - ZIP	NASHVILLE TN 37203
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	<i>5/1/95 [Signature]</i>
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	REMITTED BY MAY 1
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

**SEE SCHEDULE
ATTACHED**

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 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 checked, or on an attachment with an address.

SIGNATURE: *[Signature]* **David G Anderson** **5/1/95** **(502)571-7130**
Signature and typed or printed name of signing officer or director Date License No.

**OFFICERS AND DIRECTORS
OF
SURGICARE OF KISSIMMEE, INC.**

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Donald E. Steen	President	13455 Noel Road, 20th Floor Dallas, TX 75240
Daniel J. Moen	Executive Vice President	7975 NW 154th Street, Suite 400A Miami Lakes, FL 33016
William H. Wilcox	Executive Vice President	13455 Noel Road, 20th Floor Dallas, TX 75240
*Stephen T. Braun	Senior Vice President and Secretary	201 West Main Street Louisville, KY 40202
*David C. Colby	Senior Vice President and Treasurer	201 West Main Street Louisville, KY 40202
Joseph D. Moore	Senior Vice President	One Park Plaza Nashville, TN 37203
*Richard A. Schweinhart	Senior Vice President	201 West Main Street Louisville, KY 40202
Joseph R. Swedish	Senior Vice President	2111 Glenwood Drive Suite 100 Winter Park, FL 32792
David G. Anderson	Vice President and Assistant Treasurer	201 West Main Street Louisville, KY 40202
David T. Bradford	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203
Ashby O. Burks	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203
Bettye J. Daugherty	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203
Brandi D. Ewoldt	Vice President	500 West Main St., 10th FL Louisville, KY 40202
James D. Hinton	Vice President	1401 Mitchell Avenue Jeffersonville, IN 47131
Jay A. Jarrell	Vice President	7975 NW 154th Street, Suite 400A Miami Lakes, FL 33016
David J. Malone, Jr.	Vice President	One Park Plaza Nashville, TN 37203
Thomas L. Pritchett	Vice President	13455 Noel Road, 20th Floor Dallas, TX 75240

SURGICARE OF KISSIMMEE, INC. (cont.)

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(3)

D. Jeffrey Sapp	Vice President	Same Day Surgery of Orlando 88 West Kaley Street Orlando, FL 32806
Lewis A. Seifert	Vice President	2111 Glenwood Drive Suite 100 Winter Park, FL 32792
Rachel A. Seifert	Vice President and Assistant Secretary	201 West Main Street Louisville, KY 40202
Kathryn Dougherty	Assistant Secretary	13455 Noel Road, 20th Floor Dallas, TX 75240
Linda J. McDonald	Assistant Secretary	201 West Main Street Louisville, KY 40202

***Directors**

Florida

Persons employed in the capacity of Chief Executive Officer, Chief Financial Officer, and Assistant Administrator of facilities owned and/or operated by this Corporation, are authorized by the Board of Directors of this Corporation to negotiate and enter into contracts and agreements necessary in the conduct of the day-to-day business of such facility, including, but not limited to, physician contracts, leases, purchase agreements, etc., which with the advice of legal counsel, shall be deemed appropriate and advisable, and to execute and deliver Certificates of Resolution required in connection with such contracts and agreements.