# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S57326

Entity Name: MHS PARTNERSHIP HOLDINGS SDS, INC.

## **Current Principal Place of Business:**

ONE PARK PLAZA NASHVILLE, TN 37203

## **Current Mailing Address:**

P.O BOX 750 NASHVILLE, TN 37202 US

# FEI Number: 62-1636700

#### Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US Certificate of Status Desired: No

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.

#### SIGNATURE:

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

Title	VPS	Title	VP
Name	CLINE, NATALIE H	Name	GRUBBS, JR, RONALD LEE
Address	ONE PARK PLAZA	Address	ONE PARK PLAZA
City-State-Z	p: NASHVILLE TN 37203	City-State-Zip:	NASHVILLE TN 37203
Title	DSVP	Title	DP
Name	STINNETT, DONALD W	Name	HAZEN, SAMUEL N
Address	ONE PARK PLAZA	Address	ONE PARK PLAZA
City-State-Z	p: NASHVILLE TN 37203	City-State-Zip:	NASHVILLE TN 37203
Title	DVPA	Title	SVPT
Name	FRANCK II, JOHN M	Name	ANDERSON, DAVID G
Address	ONE PARK PLAZA	Address	ONE PARK PLAZA
City-State-Z	p: NASHVILLE TN 37203	City-State-Zip:	NASHVILLE TN 37203

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

#### SIGNATURE: NATALIE H. CLINE

VPS

04/28/2014

Date

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 28, 2014 Secretary of State CC4628748745