

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P27781 (4)  
1. Corporation Name

222 Partners, Inc.

Principal Place of Business Mailing Address  
4400 Harding Road, Suite 500 same  
Nashville, TN 37205

2. Principal Place of Business 2a. Mailing Address  
21 Suite Apt. #, etc. 26 Suite Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip Country 29 Country 30 Country

3. Date incorporated or Qualified 1/19/90 3a. Date of Last Report  
4. FEI Number 62-1291421 Applied For Not Applicable  
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 has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT Corporation System  
~~JAF Station~~  
~~P.O. Box 1421~~  
~~New York, NY 10116-1421~~

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
1200 South Pine Island Road  
83  
84 City Plantation FL 85 Zip Code 33324

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

Signature by the principal officer or registered agent or the corporation

Signature by the Registered Agent (signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P/D	<input type="checkbox"/> DELETE
NAME	Ezell, Steven D.	
STREET ADDRESS	4400 Harding Rd. suite 500	
CITY-ST-ZIP	Nashville, TN 37205	
TITLE	V/D	<input type="checkbox"/> DELETE
NAME	<del>Michael</del> Hartley, Michael A	
STREET ADDRESS	4400 Harding Rd. Suite 500	
CITY-ST-ZIP	Nashville, TN 37205	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Lehning, Robert E.	
STREET ADDRESS	4400 Harding Rd. suite 500	
CITY-ST-ZIP	Nashville, TN 37205	
TITLE	P	<input type="checkbox"/> DELETE
NAME	Ezell, W. Gerald	
STREET ADDRESS	4400 Harding Rd. Suite 500	
CITY-ST-ZIP	Nashville, TN 37205	
TITLE	S/T	<input type="checkbox"/> DELETE
NAME	Hartley, Michael A	
STREET ADDRESS	4400 Harding Rd. Suite 500	
CITY-ST-ZIP	Nashville, TN 37205	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

700001823457  
-05/15/96--01126--045  
\*\*\*200.00

5-1-96  
JR

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, unchanged, or on an attachment with my address.

SIGNATURE:

*Steven D. Ezell*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)