FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(6)

BAPTIST HEALTH SYSTEM, INC.

FILED May 19 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				1411 41411 41411 41411 41411 1441	
C/O WILLIAM C. MASON. PRES 1301 RIVERPLACE BLVD #1700 JACKSONVILLE FL 32207			C/O WILLIAM C. MASON. PRES 1301 RIVERPLACE BLVD #1700		3. Date Incorporated or Qualified 08/29/1983		
US	FL 32201	US			4. FEI Number	Applied For	
		•			59-2487136	Not Applicable	
2. Principal P	ace of Business	2a. Mailing Address 26			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May Be	
22		27			Trust Fund Contribution	Added to Fees	
City & State		City & State	}			7. Is this nonprofit corporation a homeowners association?	
23		28	T	ntru		12 No.	
Zip	Country	Zip	Cou	riuy	 This corporation owes or has paid the or Personal Property Tax due June 30. 	urrent year intangible	
24	25 9. Name and Address of Curre	29 ent Registered Agent	[30]		10. Name and Address of New Registered		
	g. Hame and Address of Carre			81 Name			
GRANGI	FR. HARVEY			00 00000	Addison (D.O. Day Mumbas in Mat Appointable)		
GRANGER, HARVEY 1301 RIVERPLACE BLVD				82 Street A	Address (P.O. Box Number is Not Acceptable)		
SUITE 170				63			
	NMILLE FL 32207			04 015		. 85 Zip Code	
				64 City	Fi		
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statu	ites, the at	ove-named	corporation submits this statement for the purpose poration's board of directors. I hereby accept the ap	of changing its registered	
office or r	egistered agent, or both, in the Stat im familiar with, and accept the obli	ie of Florida. Such ch ange was gations of, Section 617.0503 , F	authorized Iorida Stat	a by the corp utes.	poration's board or directors. I hereby accept the ap	pointment as registered	
SIGNATURE	•						
	Signature, typed or printed name of registered a	 		Agent signature	required when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ODDIRECTORS IN 12 Change Addition	
TITLE	DP Mason, William C.	☐ DELETE	1.1 TI				
NAME	1301 RIVERPLACE BLVD #1	1700	1.2 N/				
STREET ADDRESS	JACKSOVILLE, FL 00000	1700		REET ADDRESS			
CITY-ST-ZIP	DST DST	DELETE	1.4 Ci	TY-ST-ZIP		Change Addition	
NAME	COOPER, EDGAR R.		2.2 NJ				
STREET ADDRESS	7851 HEATHER LAKE COU	RT FAST		reet address			
CITY-ST-ZIP	JACKSONVILLE FL	2,101		ITY-ST- Z IP			
TITLE	D	☐ DELETE	3.1 10			☐ Change ☐ Addition	
NAME	HATCHER, WILLIAM		3.2 N/				
STREET ADDRESS	3344 SLIP 4 LAKE SHORE	В		reet address			
CITY-ST-ZIP	JACKSOVILLE, FL 00000		3.4. C	TY-ST-ZIP			
TITLE	AST	☐ DELETE	4.1 T/	TLE		☐ Change ☐ Addition	
NAME	JACKSON, REBECCA B.		4. 2 N	AME			
STREET ADDRESS	1301 RIVERPLACE BLDV #1	1700	4.3 ST	reet address		j	
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CI	TY-ST-ZIP			
TITLE	D	☐ DELETE	5.1 TI	ILE		Change Addition	
NAME	GROOVER, JACK M		5.2 N/	IME			
STREET ADDRESS	1301 RIVERPLACE BLDV #1	1700	5.3 S1	REET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL			TY-ST-ZIP		1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE		☐ DELETE	6.1 TI	TLE .		Change Addition	
NAME			6.2 N				
STREET ADDRESS			- 1	REET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP	nd in Section 119 07/3Vi). Florida Statutes, I further	portify that the information	

Thereby certify that the information supplied with this hilling does not quality for the exemption stated in Section 1.19.07(3)(i), Florida Statutes. Further certify that rine 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chartiged, or on an attachment with an address.

BAPTIST HEALTH SYSTEM, INC.

D	Haskell, Preston H.	P. O. Box 44100	Jacksonville, FL 32231
DVC	Rowe, Robert L. Jr.	9471 Baymeadows Road Suite 203	Jacksonville, FL 32256
D	Watson, William A., Jr.	11226-1 San Jose Blvd.	Jacksonville, FL 32223
D	Whorton, Judson S.	5443 John Reynolds Drive	Jacksonville, FL 32211
DC	Williams, John H., Jr.	1200 River Place Blvd.	Jacksonville, FL 32207
v	Lukaszewski, Michael	800 Prudential Drive	Jacksonville, FL 32207